

Masonicare

Based on Spending Breakdown by Claim

Hospital Name	Provider Number	State
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT

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Based on Spending Breakdown by Claim

Period	Claim Type
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility

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Based on Spending Breakdown by Claim

Avg Spending Per Episode (Hospital)	Avg Spending Per Episode (State)	Avg Spending Per Episode (Nation)
\$21.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$23.00	\$4.00	\$7.00
\$32.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$6.00	\$7.00	\$9.00
\$236.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$19.00	\$9.00	\$16.00
\$9258.00	\$8735.00	\$9399.00
\$13.00	\$24.00	\$46.00
\$1946.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00
\$1946.00	\$1915.00	\$1857.00
\$981.00	\$781.00	\$715.00
\$88.00	\$70.00	\$88.00
\$1856.00	\$1581.00	\$1645.00
\$445.00	\$479.00	\$558.00
\$2405.00	\$2310.00	\$1646.00

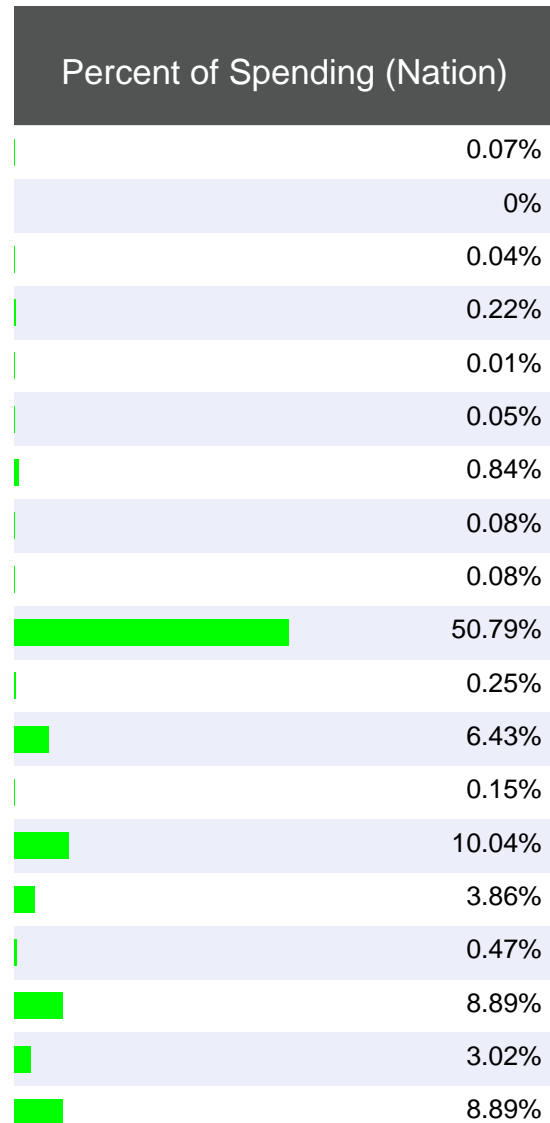
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Based on Spending Breakdown by Claim

Percent of Spending (Hospital)	Percent of Spending (State)
0.1%	0.07%
0%	0%
0.11%	0.02%
0.15%	0.16%
0.01%	0.02%
0.03%	0.03%
1.15%	0.78%
0.05%	0.05%
0.09%	0.05%
45.12%	45.63%
0.06%	0.13%
9.48%	10.18%
0.1%	0.09%
9.48%	10%
4.78%	4.08%
0.43%	0.37%
9.04%	8.26%
2.17%	2.5%
11.72%	12.07%

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient

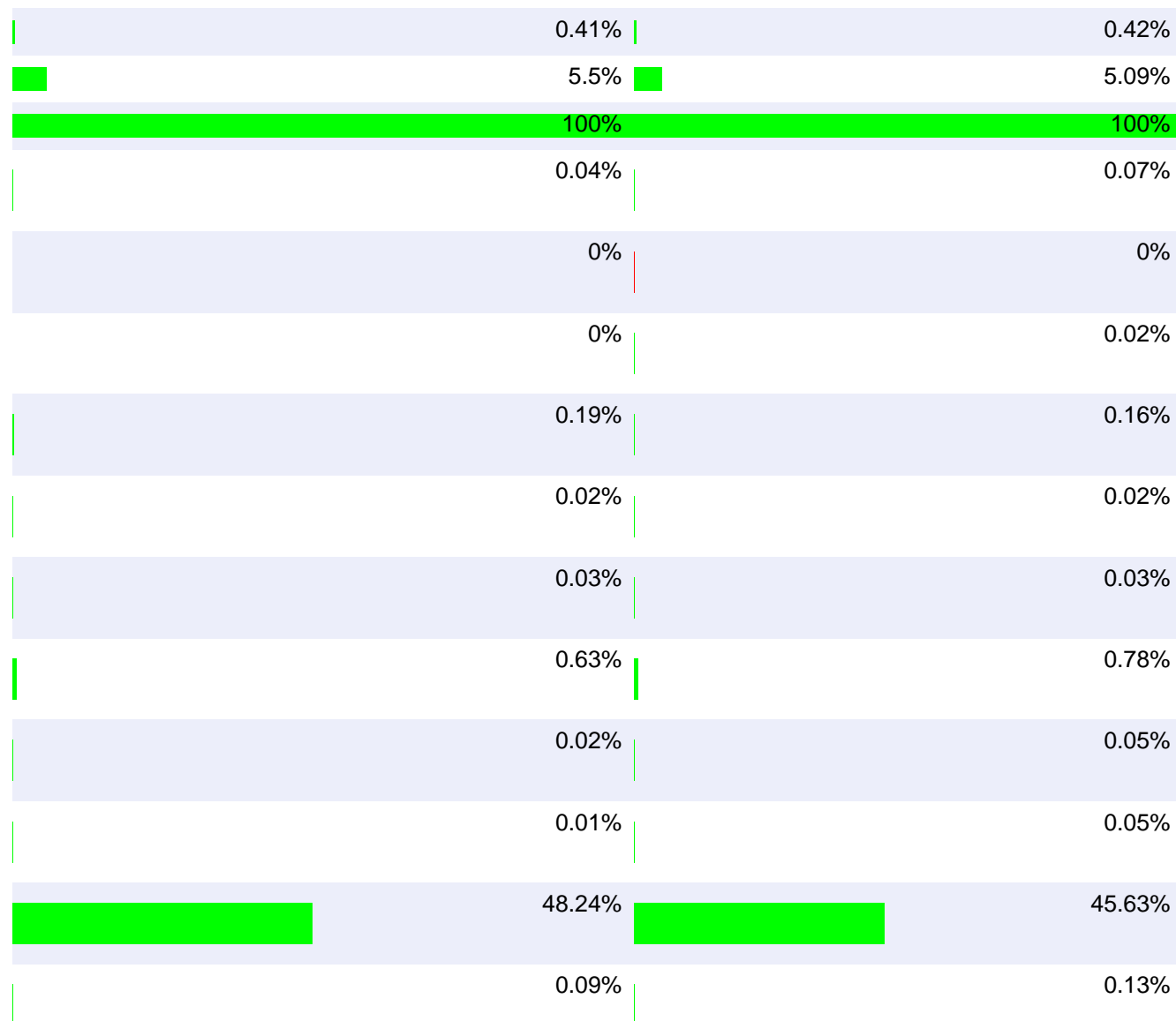
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Based on Spending Breakdown by Claim

\$84.00	\$80.00	\$110.00
\$1128.00	\$974.00	\$966.00
\$20519.00	\$19142.00	\$18506.00
\$7.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$1.00	\$4.00	\$7.00
\$39.00	\$31.00	\$40.00
\$4.00	\$3.00	\$3.00
\$6.00	\$7.00	\$9.00
\$127.00	\$150.00	\$155.00
\$4.00	\$9.00	\$14.00
\$2.00	\$9.00	\$16.00
\$9817.00	\$8735.00	\$9399.00
\$19.00	\$24.00	\$46.00

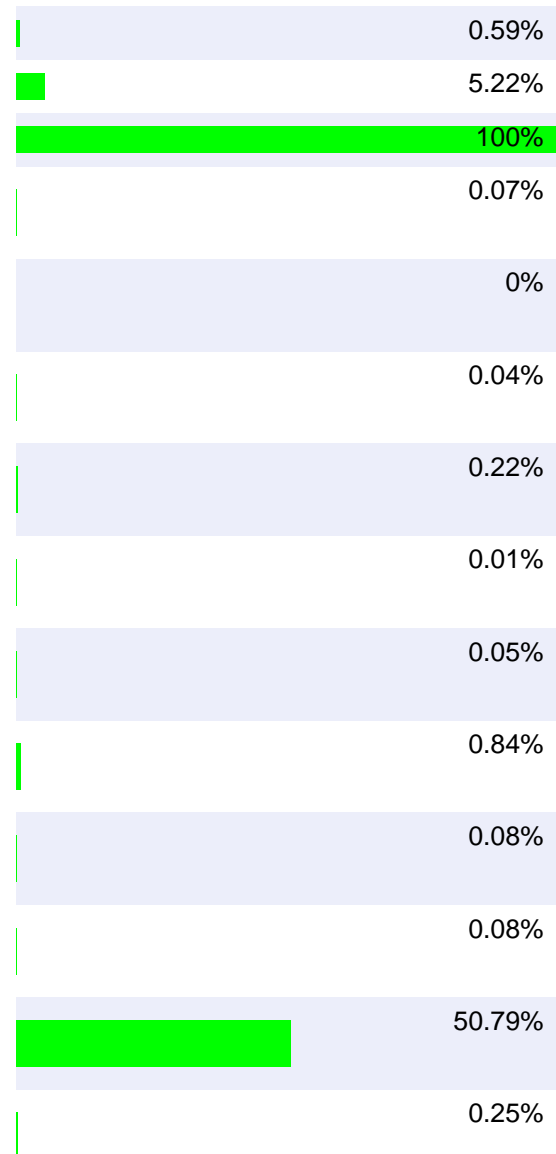
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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

CENTER

ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
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DAY KIMBALL HOSPITAL	070003	CT
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DAY KIMBALL HOSPITAL	070003	CT
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Based on Spending Breakdown by Claim

During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice

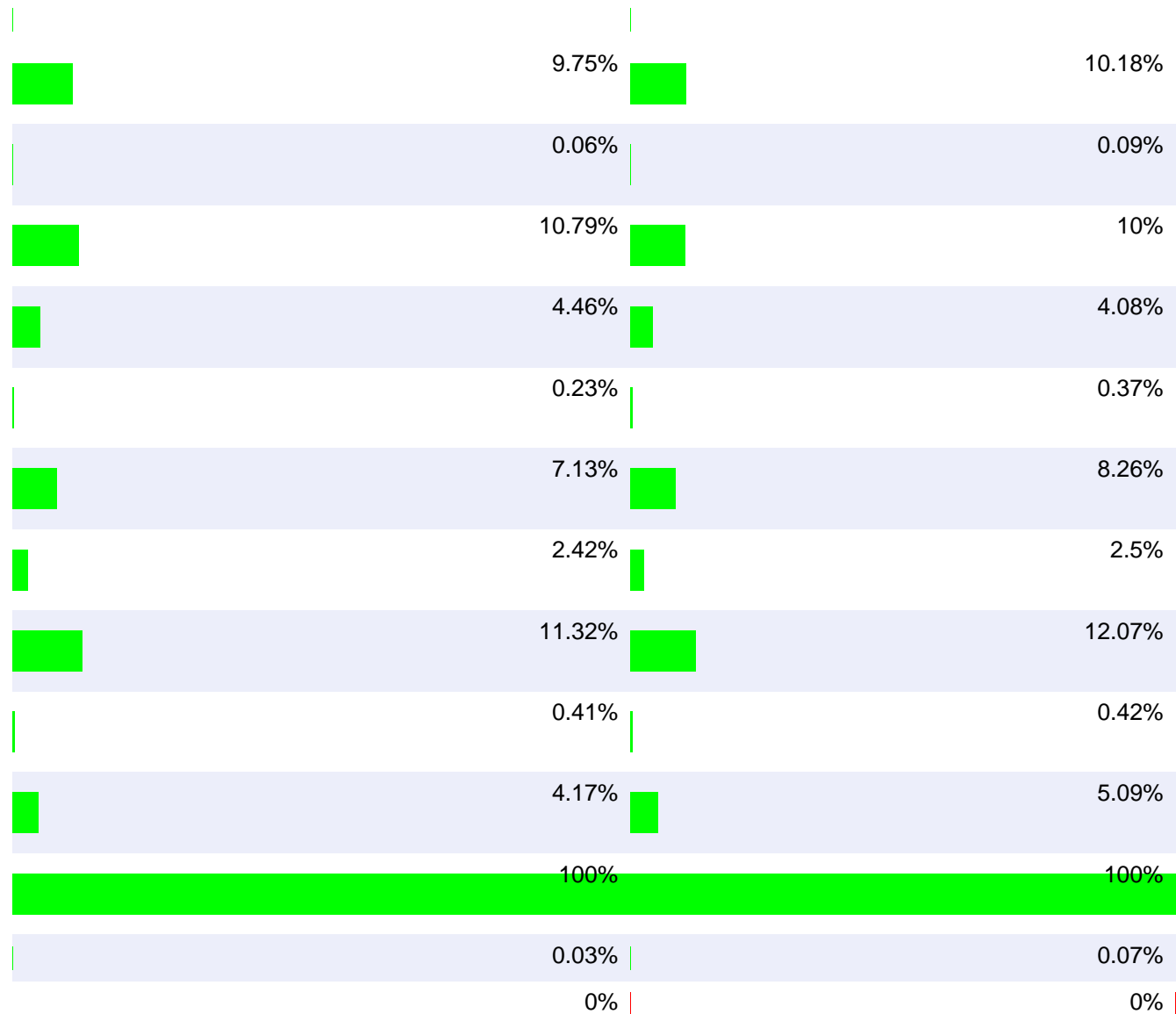
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Based on Spending Breakdown by Claim

\$1984.00	\$1949.00	\$1190.00
\$12.00	\$18.00	\$27.00
\$2195.00	\$1915.00	\$1857.00
\$907.00	\$781.00	\$715.00
\$46.00	\$70.00	\$88.00
\$1451.00	\$1581.00	\$1645.00
\$493.00	\$479.00	\$558.00
\$2305.00	\$2310.00	\$1646.00
\$84.00	\$80.00	\$110.00
\$848.00	\$974.00	\$966.00
\$20351.00	\$19142.00	\$18506.00
\$5.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00

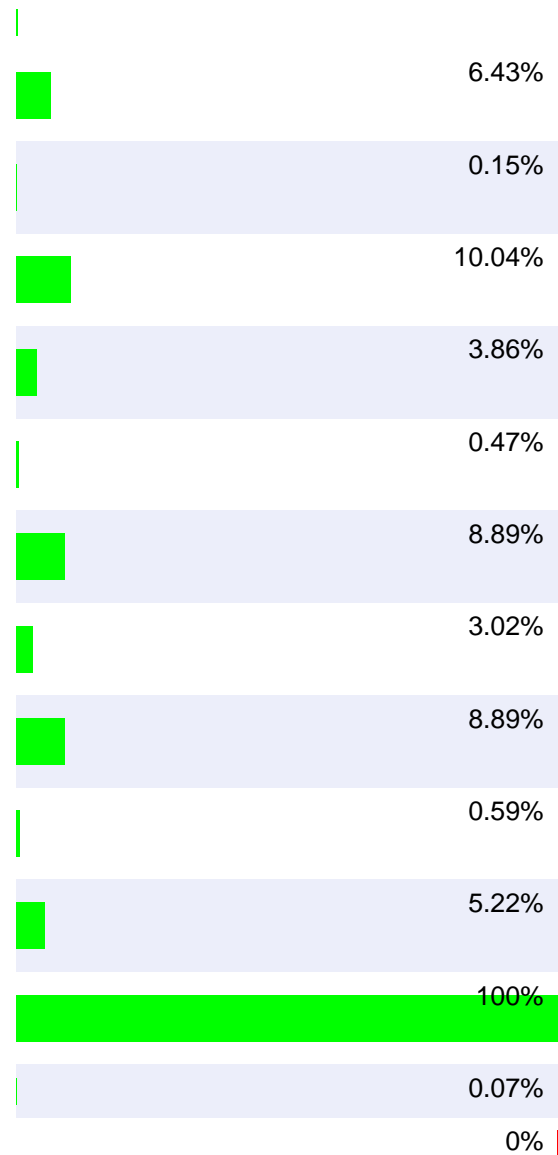
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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
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DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
SHARON HOSPITAL	070004	CT

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency

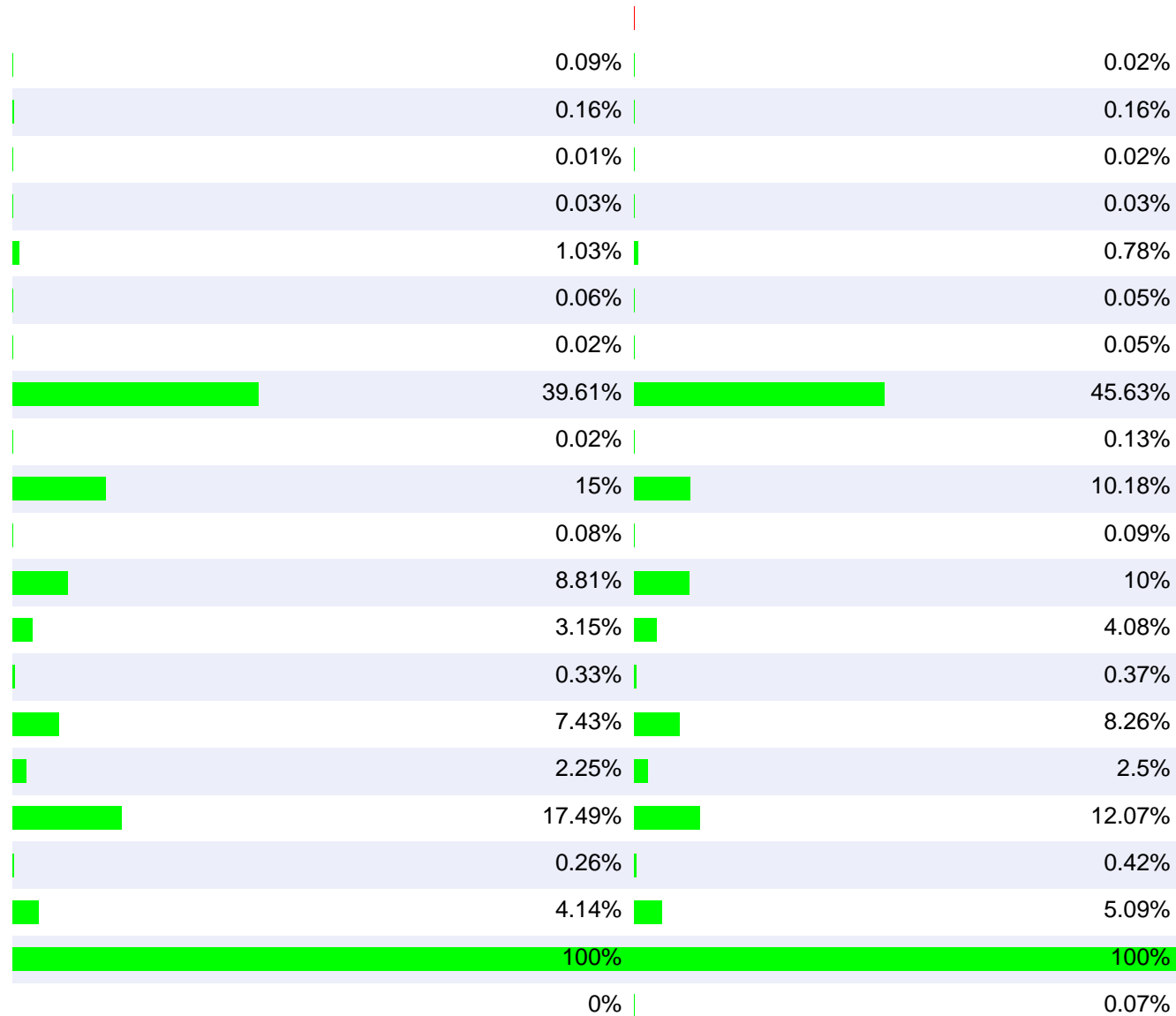
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Based on Spending Breakdown by Claim

\$15.00	\$4.00	\$7.00
\$26.00	\$31.00	\$40.00
\$1.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$167.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$3.00	\$9.00	\$16.00
\$6441.00	\$8735.00	\$9399.00
\$4.00	\$24.00	\$46.00
\$2440.00	\$1949.00	\$1190.00
\$13.00	\$18.00	\$27.00
\$1432.00	\$1915.00	\$1857.00
\$513.00	\$781.00	\$715.00
\$54.00	\$70.00	\$88.00
\$1208.00	\$1581.00	\$1645.00
\$365.00	\$479.00	\$558.00
\$2844.00	\$2310.00	\$1646.00
\$42.00	\$80.00	\$110.00
\$674.00	\$974.00	\$966.00
\$16261.00	\$19142.00	\$18506.00
\$0.00	\$13.00	\$14.00

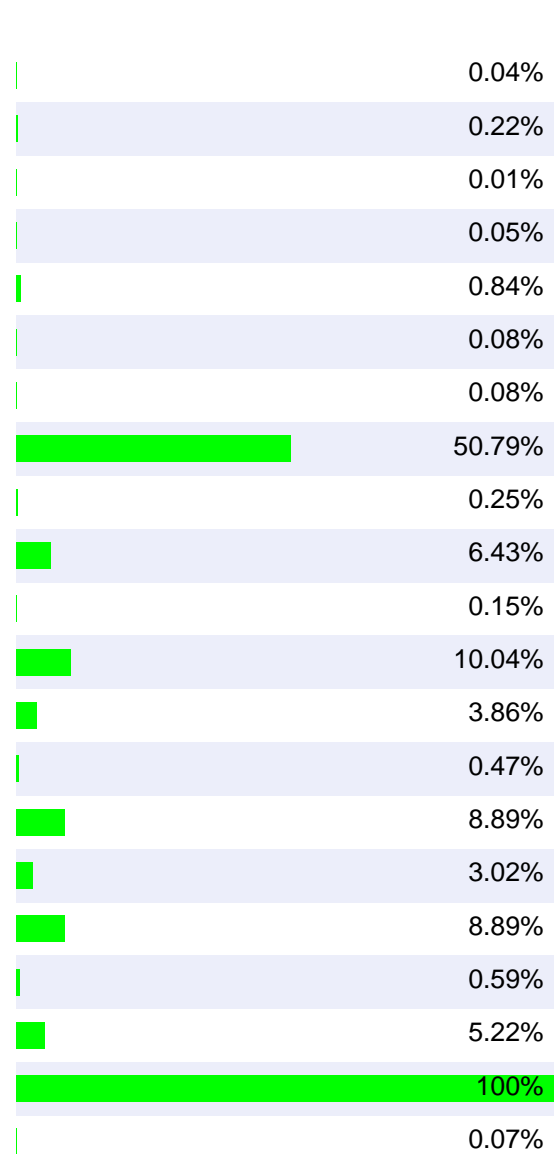
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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

SHARON HOSPITAL	070004	CT
SHARON HOSPITAL	070004	CT
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SHARON HOSPITAL	070004	CT
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SHARON HOSPITAL	070004	CT

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total

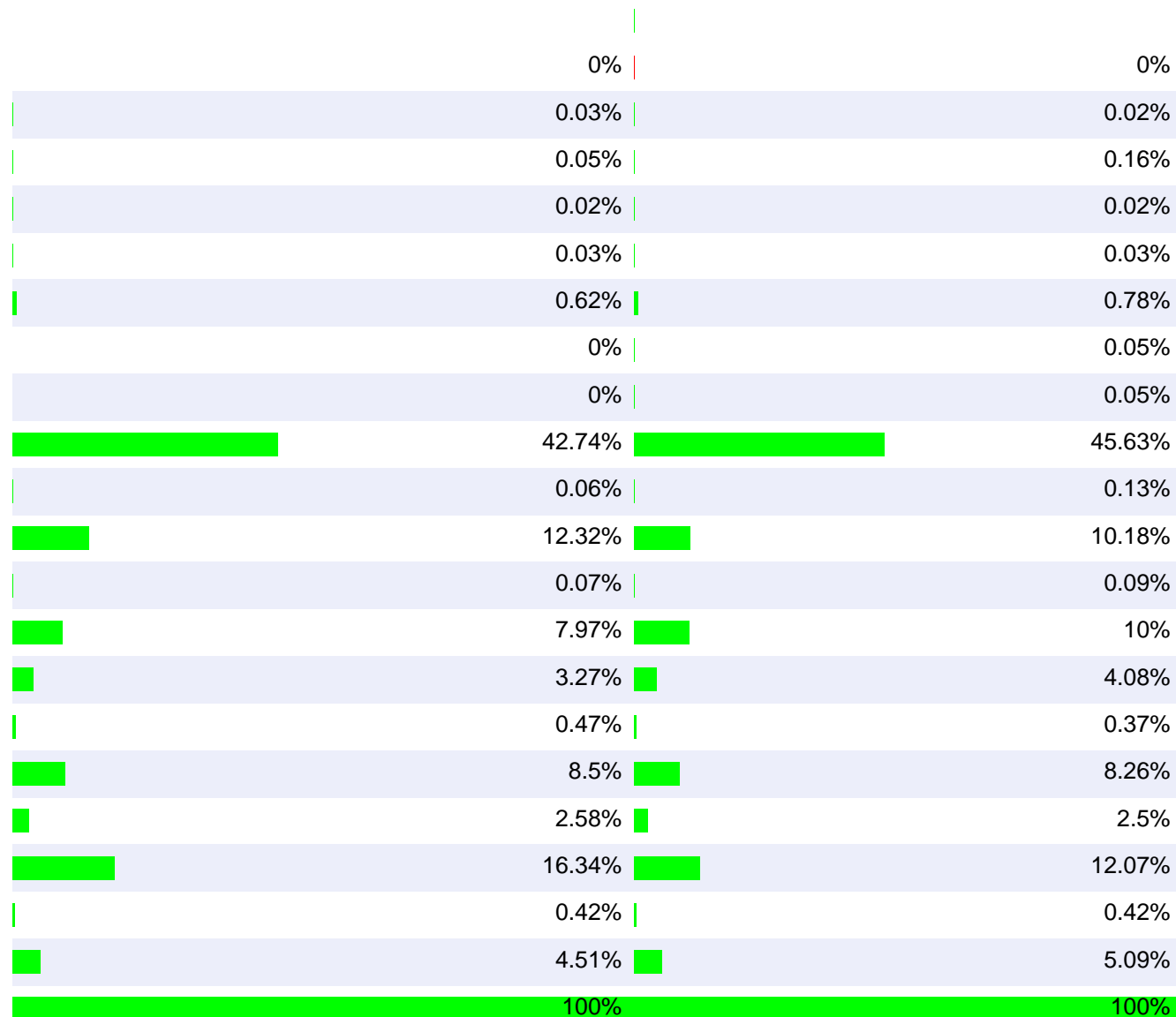
Masonicare

Based on Spending Breakdown by Claim

\$0.00	\$0.00	\$1.00
\$4.00	\$4.00	\$7.00
\$8.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$4.00	\$7.00	\$9.00
\$95.00	\$150.00	\$155.00
\$0.00	\$9.00	\$14.00
\$0.00	\$9.00	\$16.00
\$6491.00	\$8735.00	\$9399.00
\$9.00	\$24.00	\$46.00
\$1872.00	\$1949.00	\$1190.00
\$10.00	\$18.00	\$27.00
\$1211.00	\$1915.00	\$1857.00
\$497.00	\$781.00	\$715.00
\$71.00	\$70.00	\$88.00
\$1290.00	\$1581.00	\$1645.00
\$392.00	\$479.00	\$558.00
\$2481.00	\$2310.00	\$1646.00
\$64.00	\$80.00	\$110.00
\$685.00	\$974.00	\$966.00
\$15187.00	\$19142.00	\$18506.00

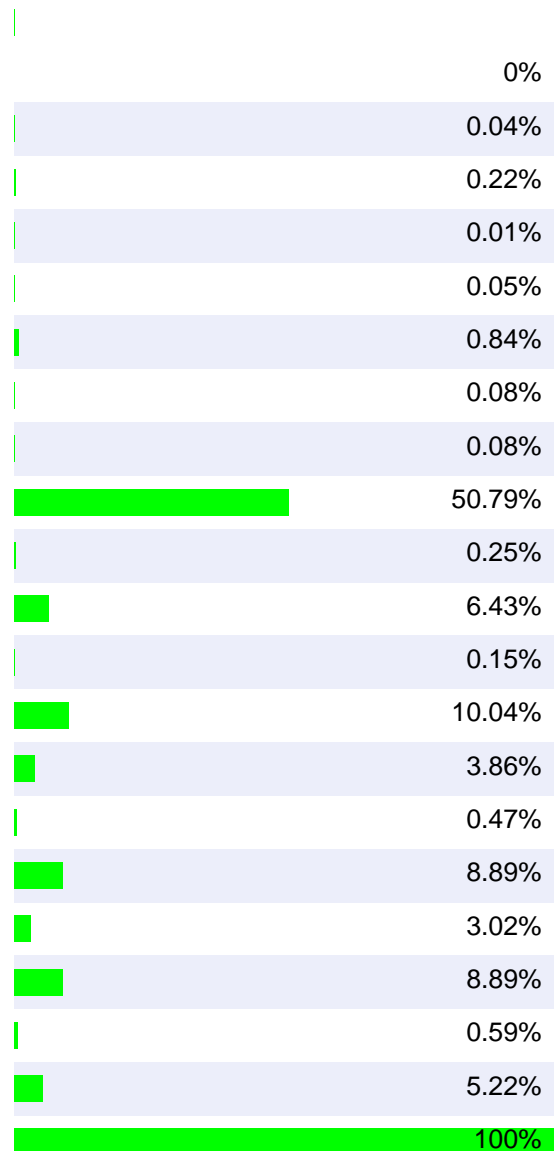
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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

WATERBURY HOSPITAL	070005	CT
WATERBURY HOSPITAL	070005	CT
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WATERBURY HOSPITAL	070005	CT

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier

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Based on Spending Breakdown by Claim

	\$13.00	\$13.00	\$14.00
	\$0.00	\$0.00	\$1.00
	\$0.00	\$4.00	\$7.00
	\$23.00	\$31.00	\$40.00
	\$4.00	\$3.00	\$3.00
	\$8.00	\$7.00	\$9.00
	\$191.00	\$150.00	\$155.00
	\$15.00	\$9.00	\$14.00
	\$7.00	\$9.00	\$16.00
	\$9167.00	\$8735.00	\$9399.00
	\$9.00	\$24.00	\$46.00
	\$2115.00	\$1949.00	\$1190.00
	\$11.00	\$18.00	\$27.00
	\$1941.00	\$1915.00	\$1857.00
	\$826.00	\$781.00	\$715.00
	\$31.00	\$70.00	\$88.00
	\$1802.00	\$1581.00	\$1645.00
	\$406.00	\$479.00	\$558.00
	\$2337.00	\$2310.00	\$1646.00
	\$60.00	\$80.00	\$110.00
	\$1044.00	\$974.00	\$966.00

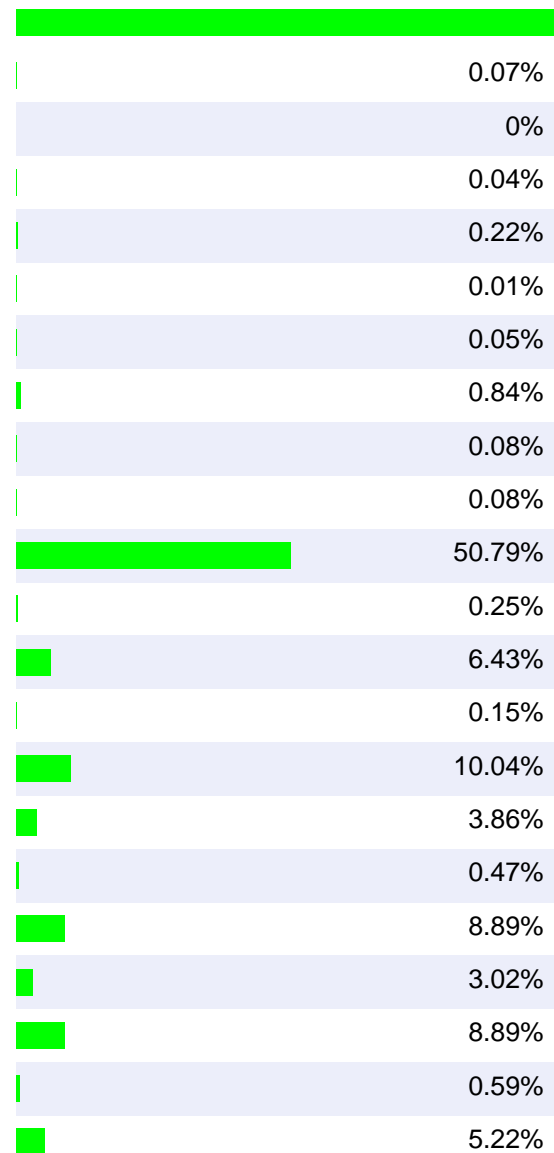
Masonicare

Based on Spending Breakdown by Claim

	0.07%	0.07%
	0%	0%
	0%	0.02%
	0.12%	0.16%
	0.02%	0.02%
	0.04%	0.03%
	0.96%	0.78%
	0.08%	0.05%
	0.03%	0.05%
	45.81%	45.63%
	0.04%	0.13%
	10.57%	10.18%
	0.06%	0.09%
	9.7%	10%
	4.13%	4.08%
	0.16%	0.37%
	9.01%	8.26%
	2.03%	2.5%
	11.68%	12.07%
	0.3%	0.42%
	5.22%	5.09%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

WATERBURY HOSPITAL	070005	CT
STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	CT
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STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	CT

Masonicare

Based on Spending Breakdown by Claim

Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment

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	\$20012.00	\$19142.00	\$18506.00
	\$17.00	\$13.00	\$14.00
	\$0.00	\$0.00	\$1.00
	\$5.00	\$4.00	\$7.00
	\$22.00	\$31.00	\$40.00
	\$5.00	\$3.00	\$3.00
	\$5.00	\$7.00	\$9.00
	\$210.00	\$150.00	\$155.00
	\$10.00	\$9.00	\$14.00
	\$11.00	\$9.00	\$16.00
	\$8934.00	\$8735.00	\$9399.00
	\$15.00	\$24.00	\$46.00
	\$1852.00	\$1949.00	\$1190.00
	\$19.00	\$18.00	\$27.00
	\$2080.00	\$1915.00	\$1857.00
	\$642.00	\$781.00	\$715.00
	\$80.00	\$70.00	\$88.00
	\$1417.00	\$1581.00	\$1645.00
	\$517.00	\$479.00	\$558.00
	\$2565.00	\$2310.00	\$1646.00
	\$73.00	\$80.00	\$110.00

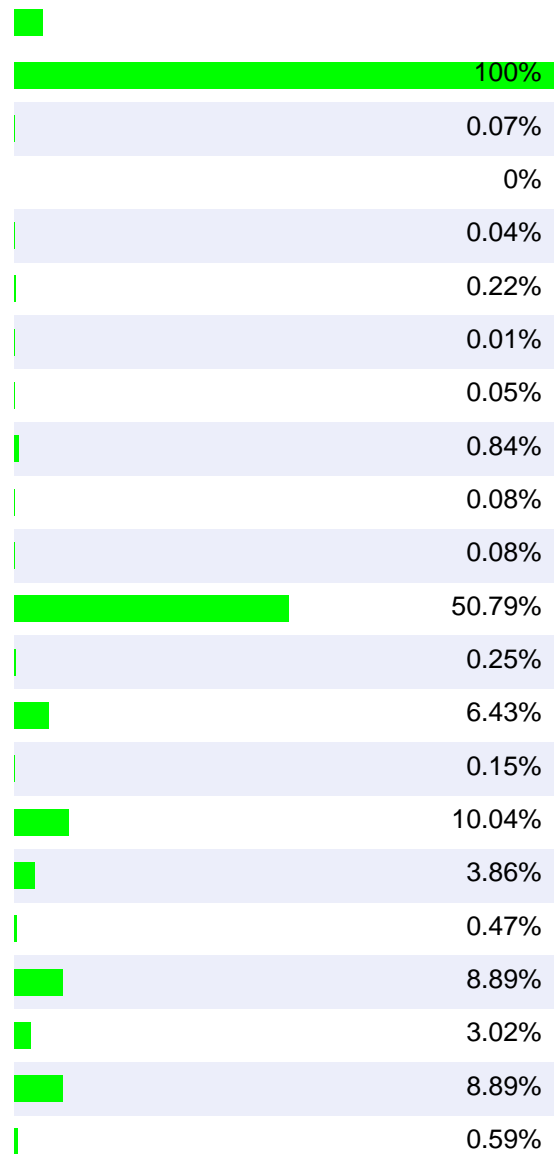
Masonicare

Based on Spending Breakdown by Claim

	100%	100%
	0.09%	0.07%
	0%	0%
	0.03%	0.02%
	0.11%	0.16%
	0.02%	0.02%
	0.03%	0.03%
	1.07%	0.78%
	0.05%	0.05%
	0.05%	0.05%
	45.6%	45.63%
	0.08%	0.13%
	9.45%	10.18%
	0.1%	0.09%
	10.62%	10%
	3.27%	4.08%
	0.41%	0.37%
	7.23%	8.26%
	2.64%	2.5%
	13.09%	12.07%
	0.37%	0.42%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility

Masonicare

Based on Spending Breakdown by Claim

	\$1116.00	\$974.00	\$966.00
	\$19594.00	\$19142.00	\$18506.00
	\$15.00	\$13.00	\$14.00
	\$0.00	\$0.00	\$1.00
	\$0.00	\$4.00	\$7.00
	\$35.00	\$31.00	\$40.00
	\$4.00	\$3.00	\$3.00
	\$4.00	\$7.00	\$9.00
	\$170.00	\$150.00	\$155.00
	\$4.00	\$9.00	\$14.00
	\$0.00	\$9.00	\$16.00
	\$8522.00	\$8735.00	\$9399.00
	\$10.00	\$24.00	\$46.00
	\$2004.00	\$1949.00	\$1190.00
	\$10.00	\$18.00	\$27.00
	\$2057.00	\$1915.00	\$1857.00
	\$665.00	\$781.00	\$715.00
	\$36.00	\$70.00	\$88.00
	\$1313.00	\$1581.00	\$1645.00
	\$432.00	\$479.00	\$558.00
	\$2541.00	\$2310.00	\$1646.00

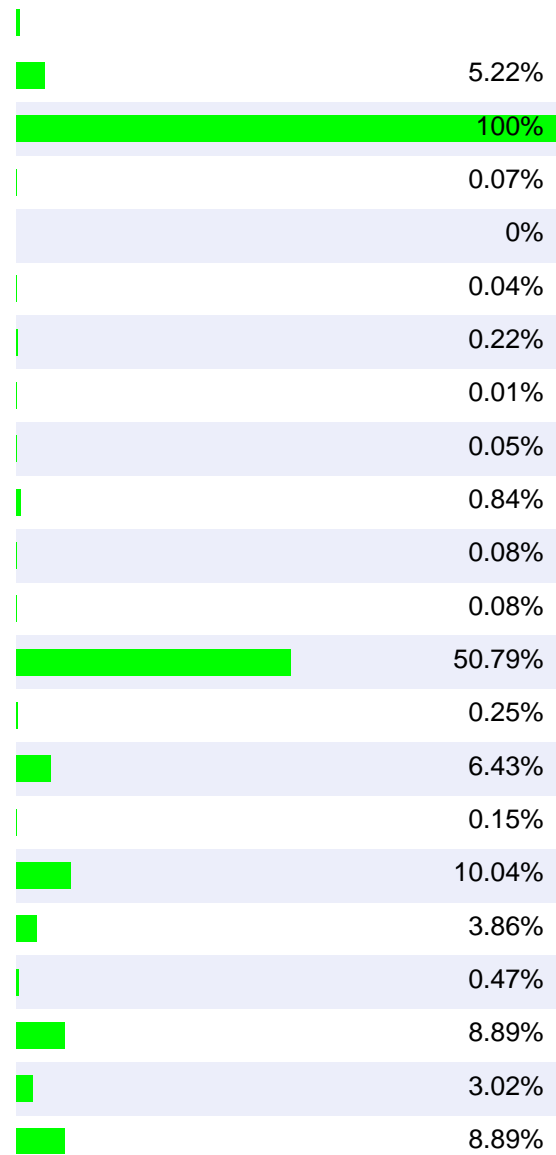
Masonicare

Based on Spending Breakdown by Claim

	5.7%	5.09%
	100%	100%
	0.08%	0.07%
	0%	0%
	0%	0.02%
	0.19%	0.16%
	0.02%	0.02%
	0.02%	0.03%
	0.91%	0.78%
	0.02%	0.05%
	0%	0.05%
	45.3%	45.63%
	0.05%	0.13%
	10.65%	10.18%
	0.05%	0.09%
	10.93%	10%
	3.53%	4.08%
	0.19%	0.37%
	6.98%	8.26%
	2.3%	2.5%
	13.5%	12.07%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
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JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient

Masonicare

Based on Spending Breakdown by Claim

\$56.00	\$80.00	\$110.00
\$935.00	\$974.00	\$966.00
\$18813.00	\$19142.00	\$18506.00
\$22.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$13.00	\$4.00	\$7.00
\$23.00	\$31.00	\$40.00
\$7.00	\$3.00	\$3.00
\$4.00	\$7.00	\$9.00
\$108.00	\$150.00	\$155.00
\$5.00	\$9.00	\$14.00
\$0.00	\$9.00	\$16.00
\$7447.00	\$8735.00	\$9399.00
\$21.00	\$24.00	\$46.00
\$2404.00	\$1949.00	\$1190.00
\$18.00	\$18.00	\$27.00
\$1860.00	\$1915.00	\$1857.00
\$757.00	\$781.00	\$715.00
\$70.00	\$70.00	\$88.00
\$1694.00	\$1581.00	\$1645.00
\$455.00	\$479.00	\$558.00

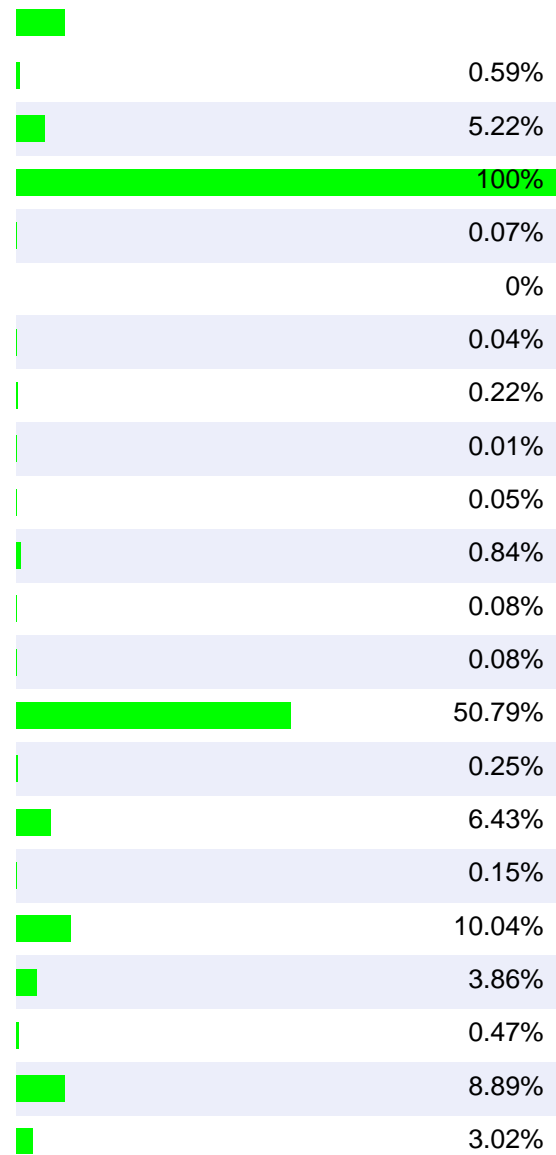
Masonicare

Based on Spending Breakdown by Claim

	0.3%	0.42%
	4.97%	5.09%
	100%	100%
	0.11%	0.07%
	0%	0%
	0.07%	0.02%
	0.12%	0.16%
	0.04%	0.02%
	0.02%	0.03%
	0.56%	0.78%
	0.03%	0.05%
	0%	0.05%
	38.28%	45.63%
	0.11%	0.13%
	12.36%	10.18%
	0.09%	0.09%
	9.56%	10%
	3.89%	4.08%
	0.36%	0.37%
	8.71%	8.26%
	2.34%	2.5%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
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BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient

Masonicare

Based on Spending Breakdown by Claim

\$3475.00	\$2310.00	\$1646.00
\$69.00	\$80.00	\$110.00
\$1003.00	\$974.00	\$966.00
\$19455.00	\$19142.00	\$18506.00
\$17.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$2.00	\$4.00	\$7.00
\$34.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$169.00	\$150.00	\$155.00
\$12.00	\$9.00	\$14.00
\$8.00	\$9.00	\$16.00
\$9906.00	\$8735.00	\$9399.00
\$8.00	\$24.00	\$46.00
\$1840.00	\$1949.00	\$1190.00
\$19.00	\$18.00	\$27.00
\$2301.00	\$1915.00	\$1857.00
\$905.00	\$781.00	\$715.00
\$44.00	\$70.00	\$88.00
\$1620.00	\$1581.00	\$1645.00

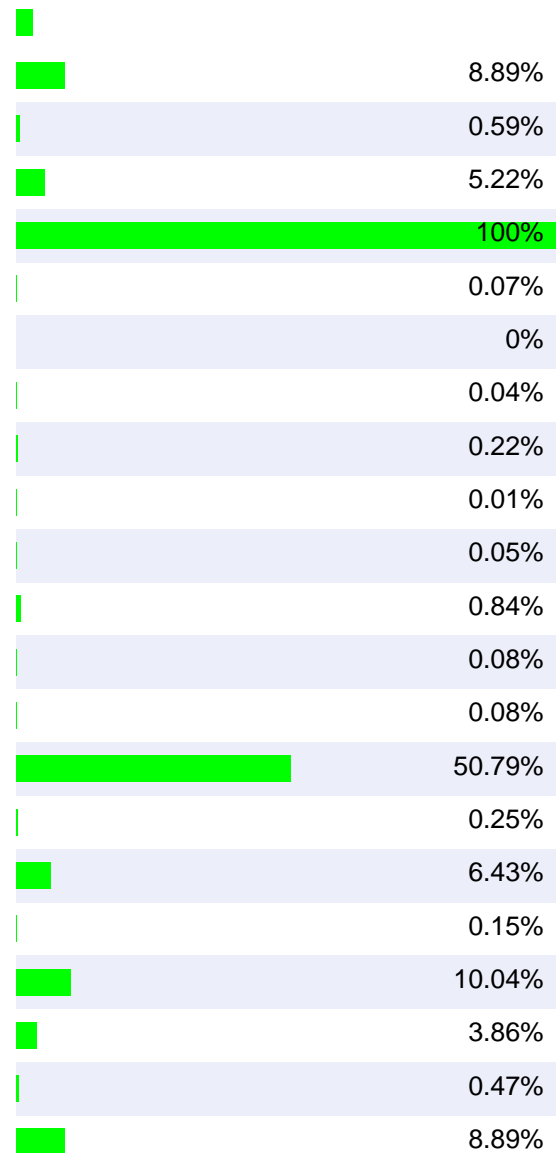
Masonicare

Based on Spending Breakdown by Claim

	17.86%	12.07%
	0.36%	0.42%
	5.15%	5.09%
	100%	100%
	0.08%	0.07%
	0%	0%
	0.01%	0.02%
	0.16%	0.16%
	0.01%	0.02%
	0.02%	0.03%
	0.81%	0.78%
	0.06%	0.05%
	0.04%	0.05%
	47.44%	45.63%
	0.04%	0.13%
	8.81%	10.18%
	0.09%	0.09%
	11.02%	10%
	4.33%	4.08%
	0.21%	0.37%
	7.76%	8.26%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
BRIDGEPORT HOSPITAL	070010	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
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CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice

Masonicare

Based on Spending Breakdown by Claim

	\$429.00	\$479.00	\$558.00
	\$2302.00	\$2310.00	\$1646.00
	\$64.00	\$80.00	\$110.00
	\$1198.00	\$974.00	\$966.00
	\$20884.00	\$19142.00	\$18506.00
	\$18.00	\$13.00	\$14.00
	\$0.00	\$0.00	\$1.00
	\$3.00	\$4.00	\$7.00
	\$28.00	\$31.00	\$40.00
	\$2.00	\$3.00	\$3.00
	\$15.00	\$7.00	\$9.00
	\$160.00	\$150.00	\$155.00
	\$21.00	\$9.00	\$14.00
	\$0.00	\$9.00	\$16.00
	\$7748.00	\$8735.00	\$9399.00
	\$15.00	\$24.00	\$46.00
	\$1782.00	\$1949.00	\$1190.00
	\$31.00	\$18.00	\$27.00
	\$1732.00	\$1915.00	\$1857.00
	\$989.00	\$781.00	\$715.00
	\$73.00	\$70.00	\$88.00

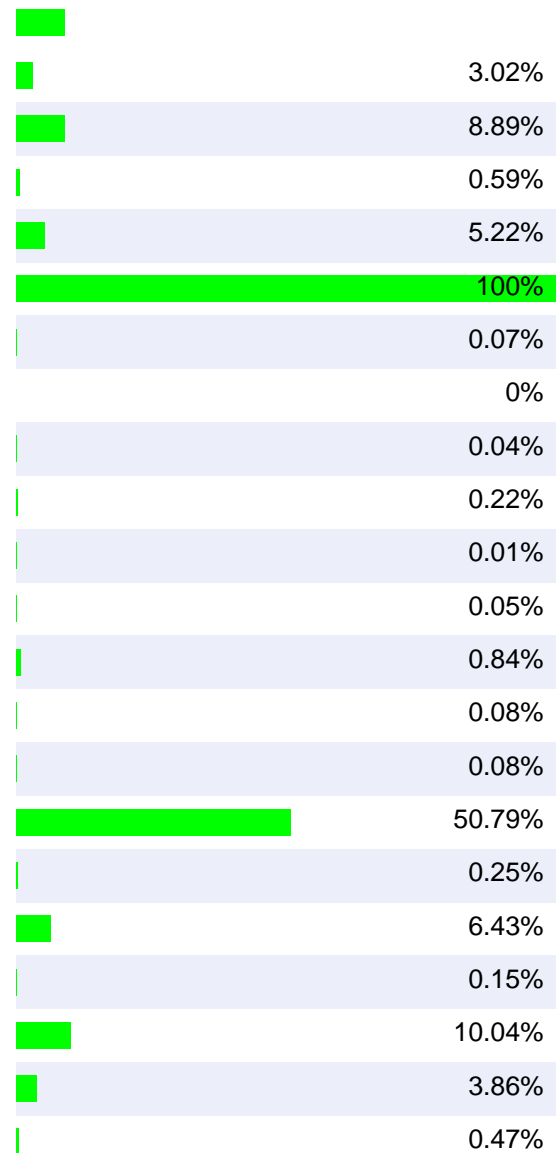
Masonicare

Based on Spending Breakdown by Claim

	2.05%	2.5%
	11.02%	12.07%
	0.31%	0.42%
	5.74%	5.09%
	100%	100%
	0.1%	0.07%
	0%	0%
	0.02%	0.02%
	0.16%	0.16%
	0.01%	0.02%
	0.08%	0.03%
	0.91%	0.78%
	0.12%	0.05%
	0%	0.05%
	44.15%	45.63%
	0.08%	0.13%
	10.16%	10.18%
	0.18%	0.09%
	9.87%	10%
	5.64%	4.08%
	0.41%	0.37%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
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ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency

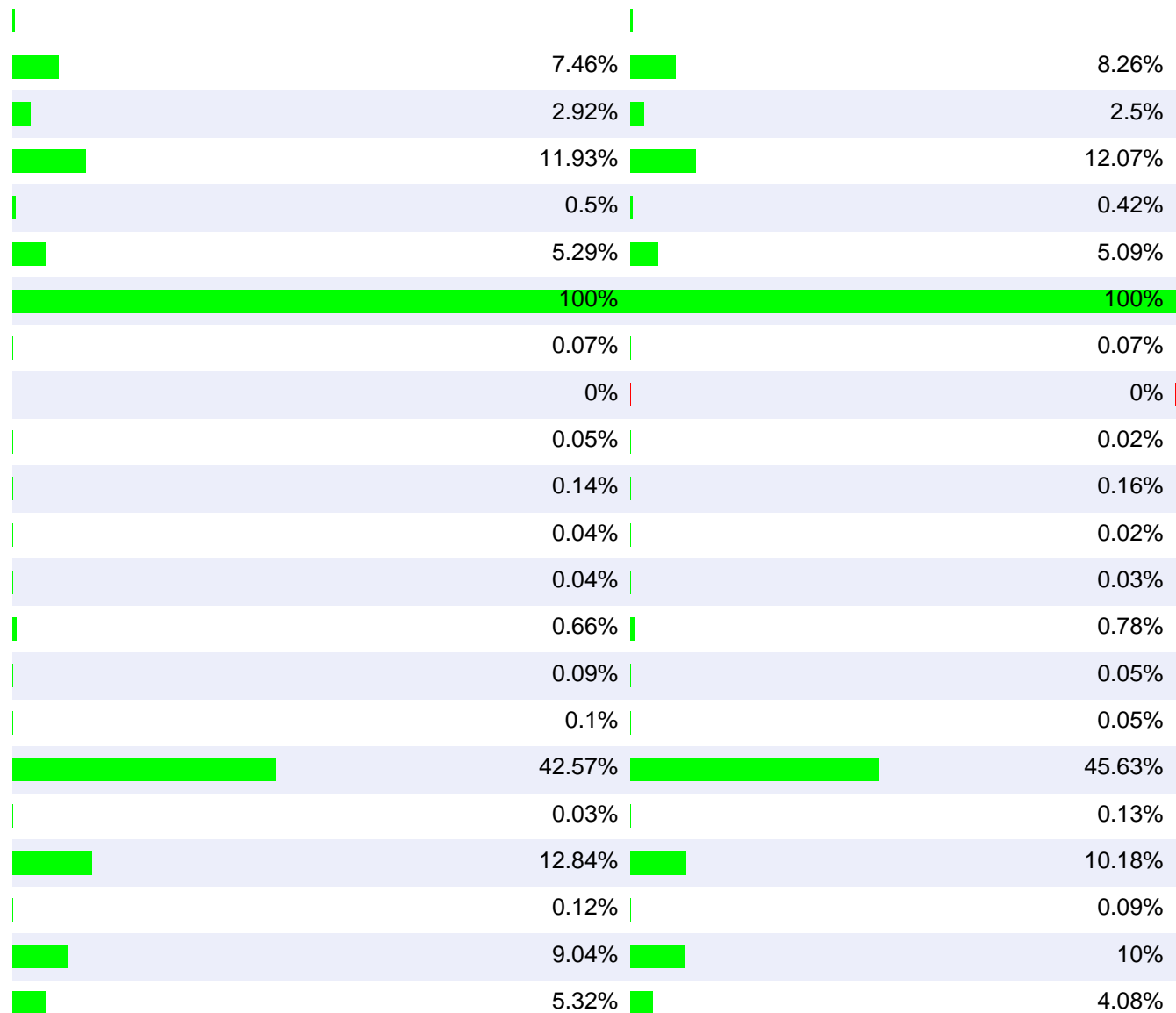
Masonicare

Based on Spending Breakdown by Claim

\$1309.00	\$1581.00	\$1645.00
\$513.00	\$479.00	\$558.00
\$2093.00	\$2310.00	\$1646.00
\$87.00	\$80.00	\$110.00
\$929.00	\$974.00	\$966.00
\$17547.00	\$19142.00	\$18506.00
\$12.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$8.00	\$4.00	\$7.00
\$26.00	\$31.00	\$40.00
\$8.00	\$3.00	\$3.00
\$8.00	\$7.00	\$9.00
\$120.00	\$150.00	\$155.00
\$17.00	\$9.00	\$14.00
\$19.00	\$9.00	\$16.00
\$7811.00	\$8735.00	\$9399.00
\$5.00	\$24.00	\$46.00
\$2356.00	\$1949.00	\$1190.00
\$22.00	\$18.00	\$27.00
\$1659.00	\$1915.00	\$1857.00
\$976.00	\$781.00	\$715.00

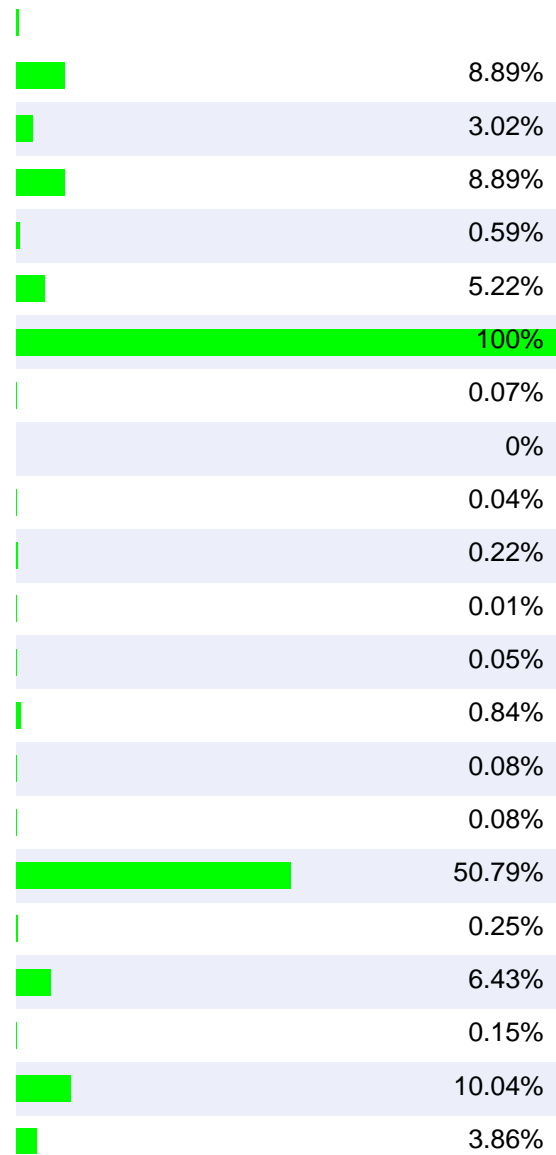
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
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NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier

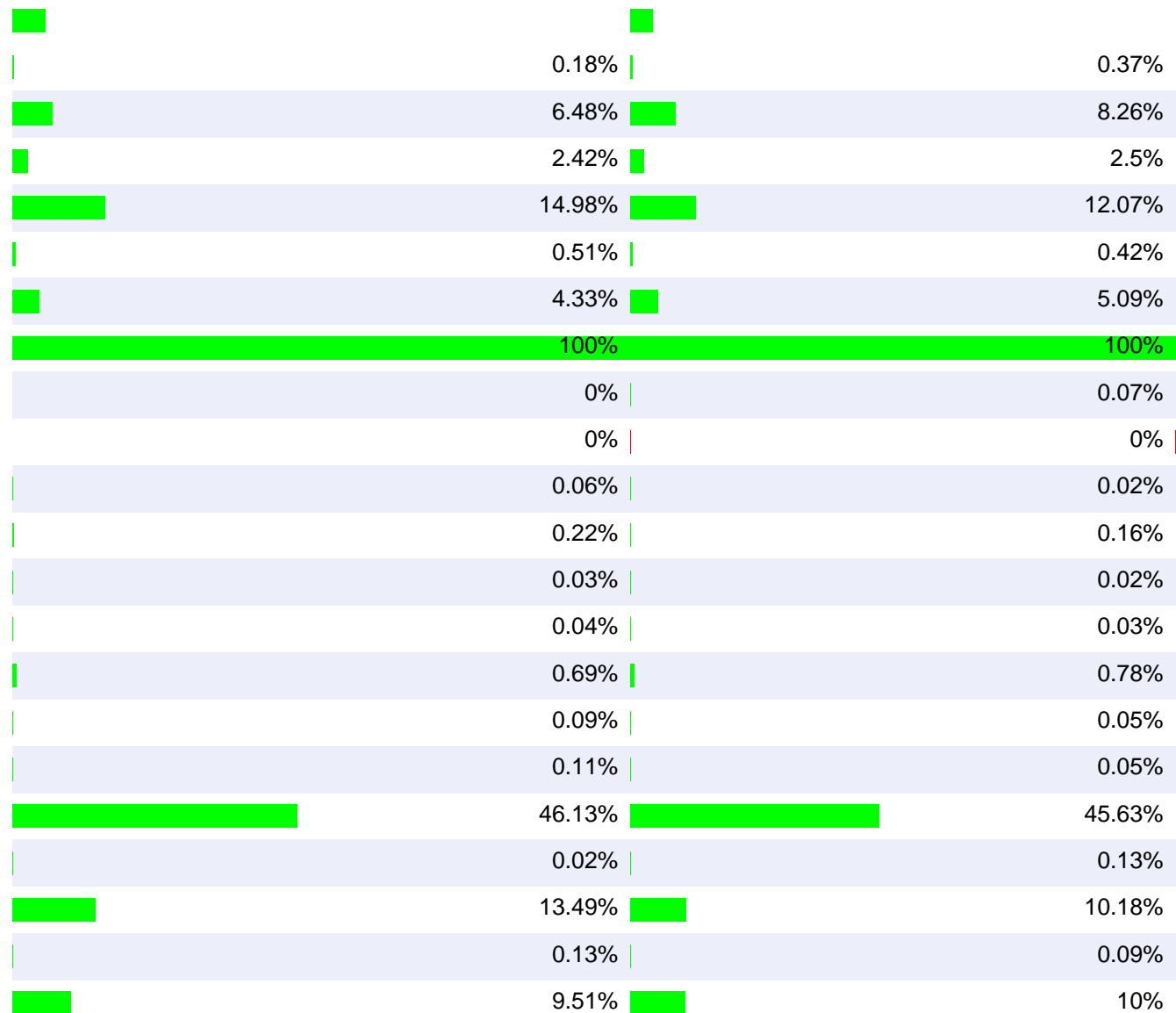
Masonicare

Based on Spending Breakdown by Claim

	\$34.00	\$70.00	\$88.00
	\$1188.00	\$1581.00	\$1645.00
	\$443.00	\$479.00	\$558.00
	\$2748.00	\$2310.00	\$1646.00
	\$93.00	\$80.00	\$110.00
	\$794.00	\$974.00	\$966.00
	\$18348.00	\$19142.00	\$18506.00
	\$0.00	\$13.00	\$14.00
	\$0.00	\$0.00	\$1.00
	\$10.00	\$4.00	\$7.00
	\$39.00	\$31.00	\$40.00
	\$5.00	\$3.00	\$3.00
	\$7.00	\$7.00	\$9.00
	\$124.00	\$150.00	\$155.00
	\$16.00	\$9.00	\$14.00
	\$20.00	\$9.00	\$16.00
	\$8353.00	\$8735.00	\$9399.00
	\$4.00	\$24.00	\$46.00
	\$2444.00	\$1949.00	\$1190.00
	\$23.00	\$18.00	\$27.00
	\$1723.00	\$1915.00	\$1857.00

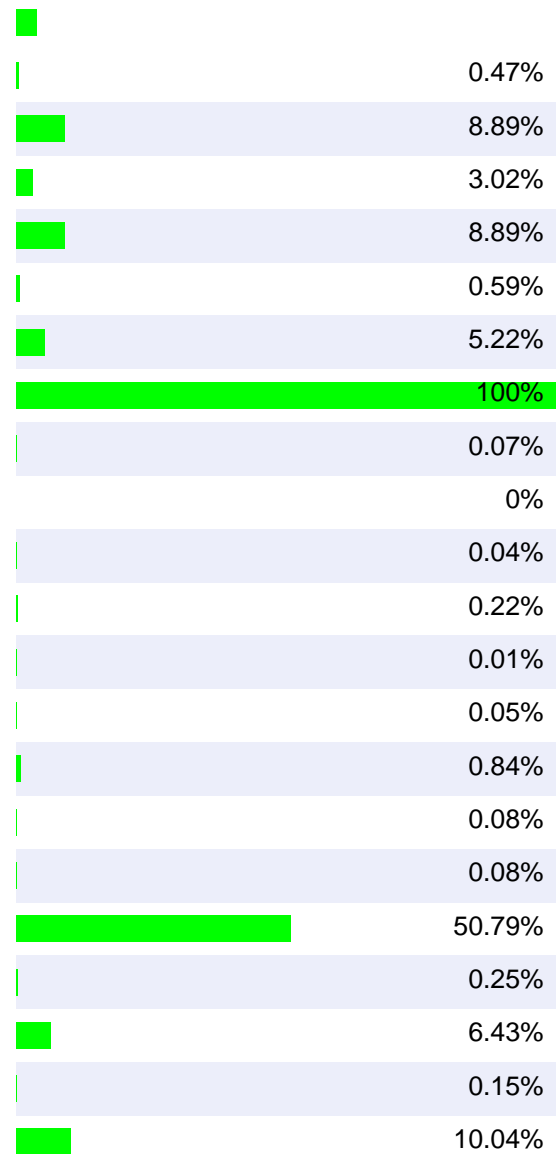
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
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SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment

Masonicare

Based on Spending Breakdown by Claim

\$622.00	\$781.00	\$715.00
\$54.00	\$70.00	\$88.00
\$983.00	\$1581.00	\$1645.00
\$458.00	\$479.00	\$558.00
\$2446.00	\$2310.00	\$1646.00
\$77.00	\$80.00	\$110.00
\$701.00	\$974.00	\$966.00
\$18109.00	\$19142.00	\$18506.00
\$14.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$22.00	\$31.00	\$40.00
\$0.00	\$3.00	\$3.00
\$6.00	\$7.00	\$9.00
\$136.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$10.00	\$9.00	\$16.00
\$8383.00	\$8735.00	\$9399.00
\$5.00	\$24.00	\$46.00
\$2042.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00

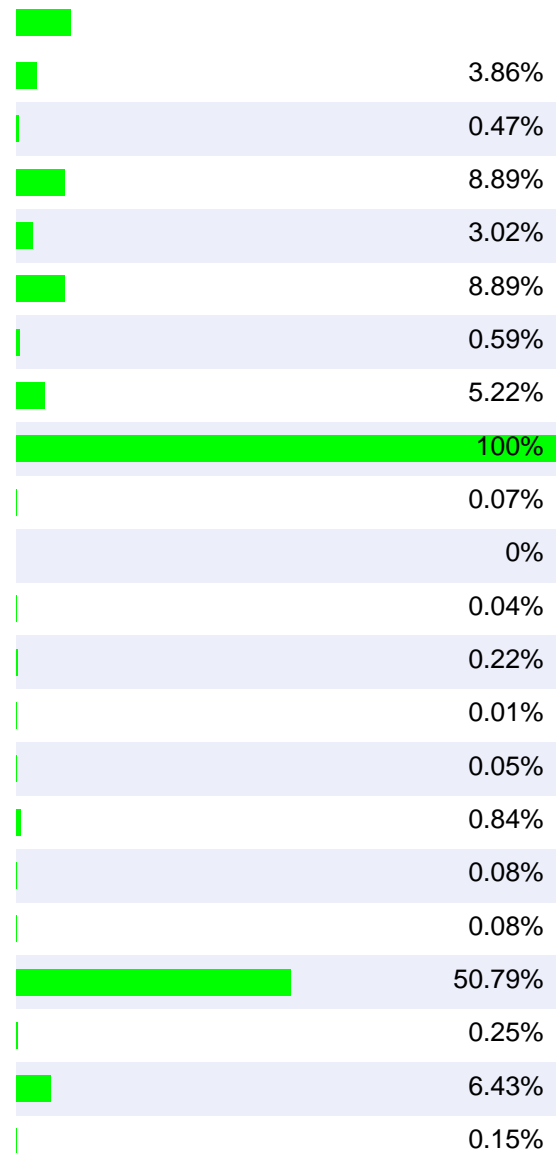
Masonicare

Based on Spending Breakdown by Claim

	3.44%	4.08%
	0.3%	0.37%
	5.43%	8.26%
	2.53%	2.5%
	13.51%	12.07%
	0.43%	0.42%
	3.87%	5.09%
	100%	100%
	0.07%	0.07%
	0%	0%
	0%	0.02%
	0.12%	0.16%
	0%	0.02%
	0.03%	0.03%
	0.73%	0.78%
	0.06%	0.05%
	0.05%	0.05%
	44.94%	45.63%
	0.02%	0.13%
	10.95%	10.18%
	0.11%	0.09%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility











































Masonicare

Based on Spending Breakdown by Claim

	\$1905.00	\$1915.00	\$1857.00
	\$810.00	\$781.00	\$715.00
	\$58.00	\$70.00	\$88.00
	\$1434.00	\$1581.00	\$1645.00
	\$329.00	\$479.00	\$558.00
	\$2377.00	\$2310.00	\$1646.00
	\$91.00	\$80.00	\$110.00
	\$1001.00	\$974.00	\$966.00
	\$18652.00	\$19142.00	\$18506.00
	\$16.00	\$13.00	\$14.00
	\$0.00	\$0.00	\$1.00
	\$2.00	\$4.00	\$7.00
	\$17.00	\$31.00	\$40.00
	\$2.00	\$3.00	\$3.00
	\$4.00	\$7.00	\$9.00
	\$146.00	\$150.00	\$155.00
	\$5.00	\$9.00	\$14.00
	\$0.00	\$9.00	\$16.00
	\$8133.00	\$8735.00	\$9399.00
	\$9.00	\$24.00	\$46.00
	\$2298.00	\$1949.00	\$1190.00

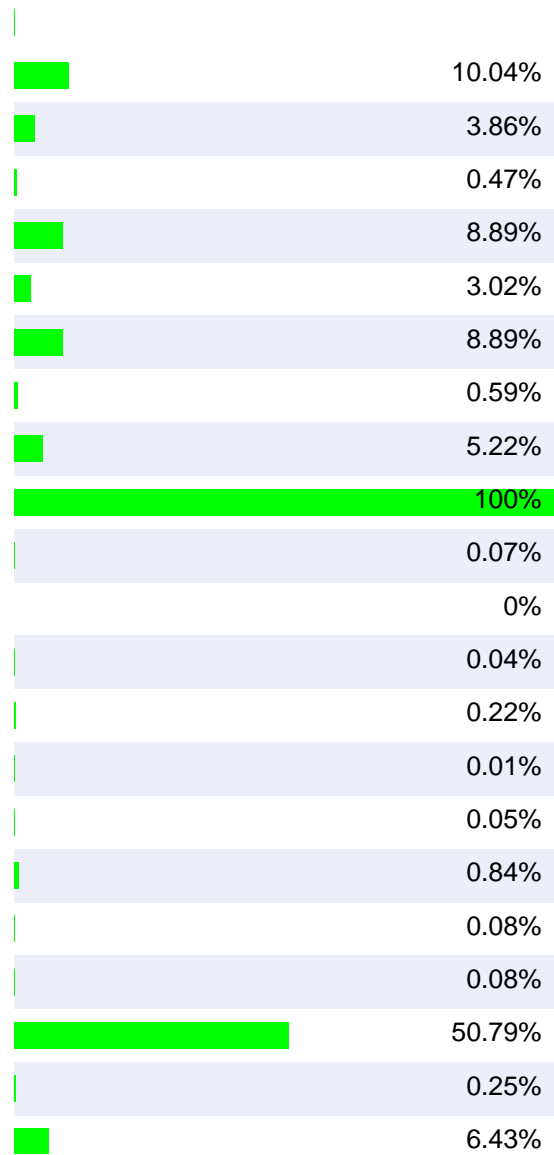
Masonicare

Based on Spending Breakdown by Claim

	10.21%		10%
	4.34%		4.08%
	0.31%		0.37%
	7.69%		8.26%
	1.76%		2.5%
	12.74%		12.07%
	0.49%		0.42%
	5.37%		5.09%
	100%		100%
	0.08%		0.07%
	0%		0%
	0.01%		0.02%
	0.09%		0.16%
	0.01%		0.02%
	0.02%		0.03%
	0.76%		0.78%
	0.03%		0.05%
	0%		0.05%
	42.62%		45.63%
	0.05%		0.13%
	12.04%		10.18%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient

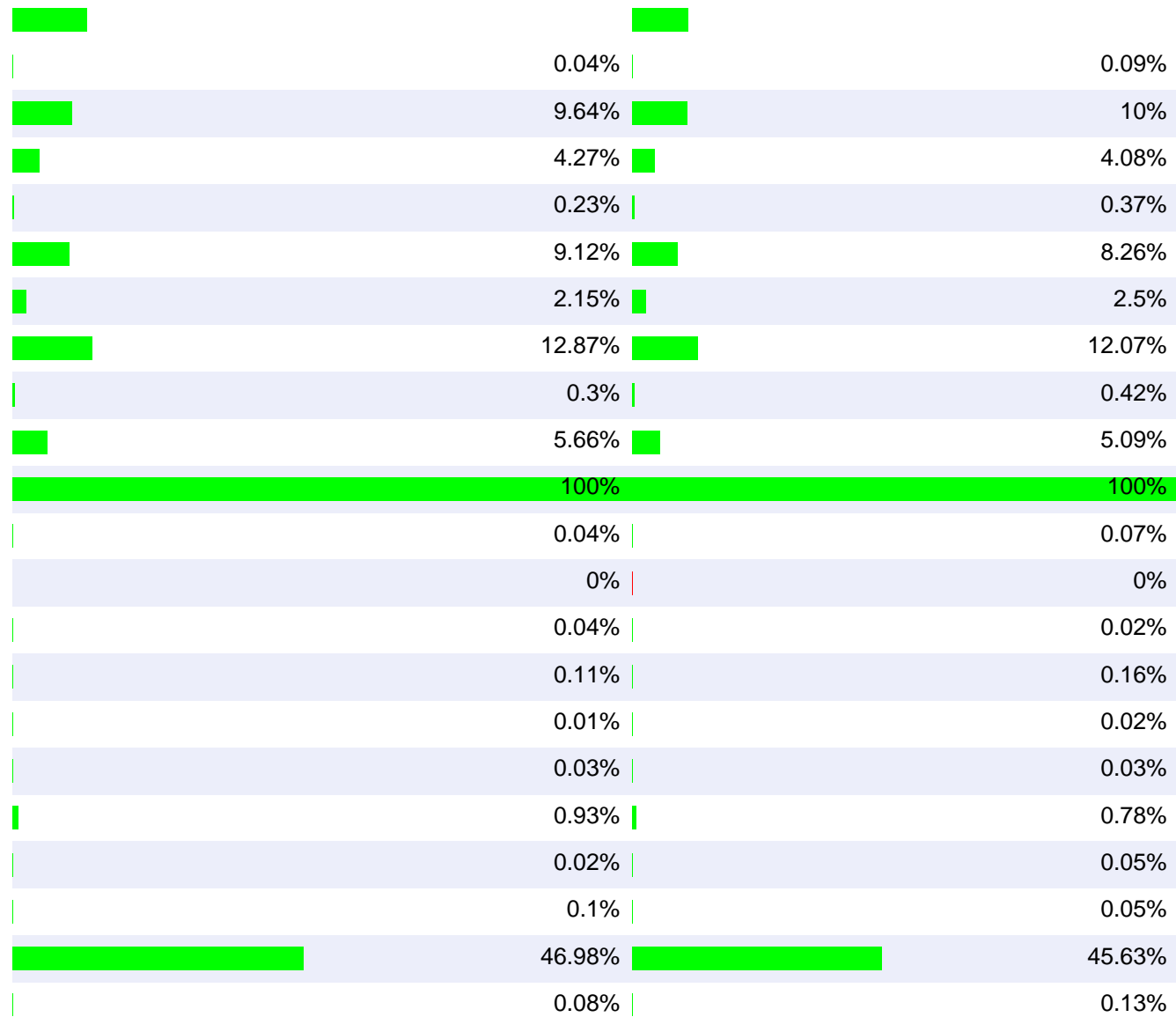
Masonicare

Based on Spending Breakdown by Claim

\$8.00	\$18.00	\$27.00
\$1839.00	\$1915.00	\$1857.00
\$815.00	\$781.00	\$715.00
\$44.00	\$70.00	\$88.00
\$1741.00	\$1581.00	\$1645.00
\$411.00	\$479.00	\$558.00
\$2456.00	\$2310.00	\$1646.00
\$57.00	\$80.00	\$110.00
\$1081.00	\$974.00	\$966.00
\$19086.00	\$19142.00	\$18506.00
\$7.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$7.00	\$4.00	\$7.00
\$19.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$4.00	\$7.00	\$9.00
\$158.00	\$150.00	\$155.00
\$4.00	\$9.00	\$14.00
\$16.00	\$9.00	\$16.00
\$8004.00	\$8735.00	\$9399.00
\$13.00	\$24.00	\$46.00

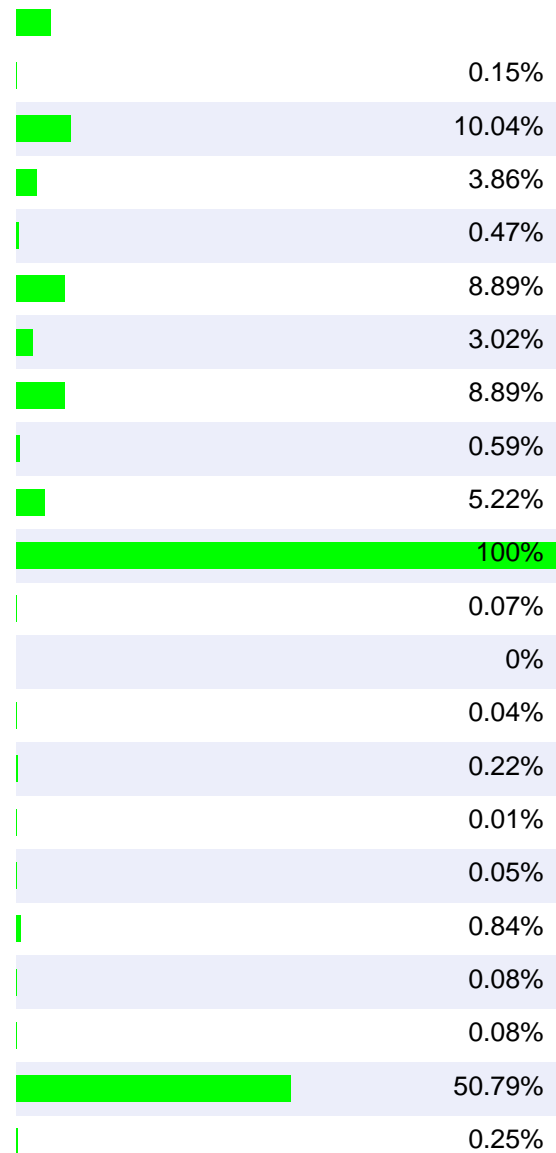
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient

Masonicare

Based on Spending Breakdown by Claim

\$1653.00	\$1949.00	\$1190.00
\$13.00	\$18.00	\$27.00
\$1760.00	\$1915.00	\$1857.00
\$776.00	\$781.00	\$715.00
\$64.00	\$70.00	\$88.00
\$1341.00	\$1581.00	\$1645.00
\$414.00	\$479.00	\$558.00
\$1814.00	\$2310.00	\$1646.00
\$59.00	\$80.00	\$110.00
\$906.00	\$974.00	\$966.00
\$17035.00	\$19142.00	\$18506.00
\$21.00	\$13.00	\$14.00
\$1.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$33.00	\$31.00	\$40.00
\$5.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$145.00	\$150.00	\$155.00
\$26.00	\$9.00	\$14.00
\$30.00	\$9.00	\$16.00
\$8346.00	\$8735.00	\$9399.00

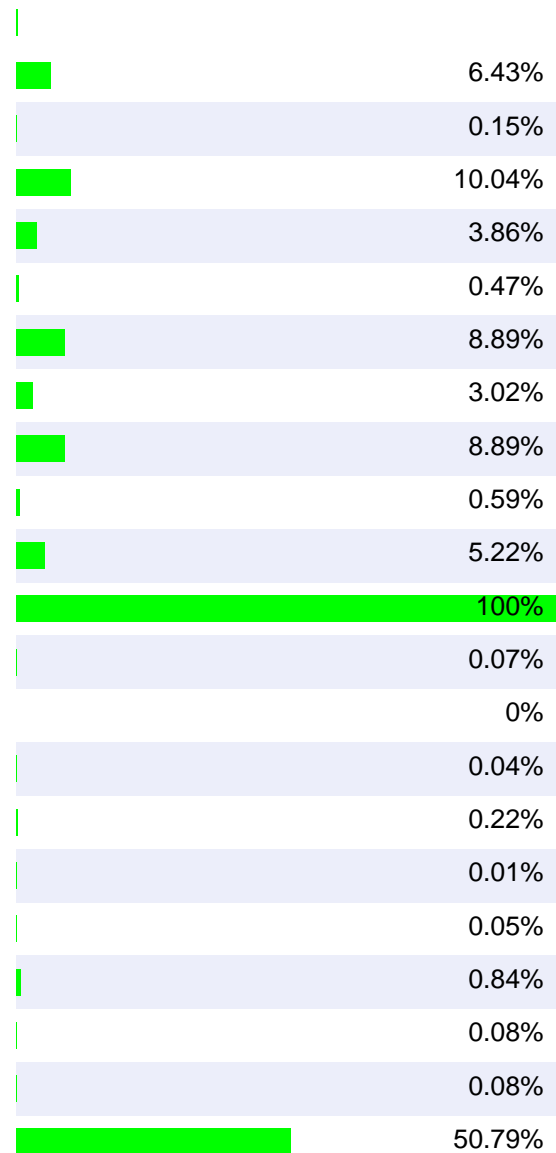
Masonicare

Based on Spending Breakdown by Claim

	9.7%	10.18%
	0.08%	0.09%
	10.33%	10%
	4.56%	4.08%
	0.37%	0.37%
	7.87%	8.26%
	2.43%	2.5%
	10.65%	12.07%
	0.35%	0.42%
	5.32%	5.09%
	100%	100%
	0.1%	0.07%
	0%	0%
	0%	0.02%
	0.16%	0.16%
	0.03%	0.02%
	0.03%	0.03%
	0.72%	0.78%
	0.13%	0.05%
	0.15%	0.05%
	41.55%	45.63%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice

Masonicare

Based on Spending Breakdown by Claim

\$15.00	\$24.00	\$46.00
\$2289.00	\$1949.00	\$1190.00
\$17.00	\$18.00	\$27.00
\$2042.00	\$1915.00	\$1857.00
\$962.00	\$781.00	\$715.00
\$161.00	\$70.00	\$88.00
\$1557.00	\$1581.00	\$1645.00
\$366.00	\$479.00	\$558.00
\$2887.00	\$2310.00	\$1646.00
\$76.00	\$80.00	\$110.00
\$1101.00	\$974.00	\$966.00
\$20088.00	\$19142.00	\$18506.00
\$15.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$16.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$3.00	\$7.00	\$9.00
\$131.00	\$150.00	\$155.00
\$6.00	\$9.00	\$14.00
\$34.00	\$9.00	\$16.00

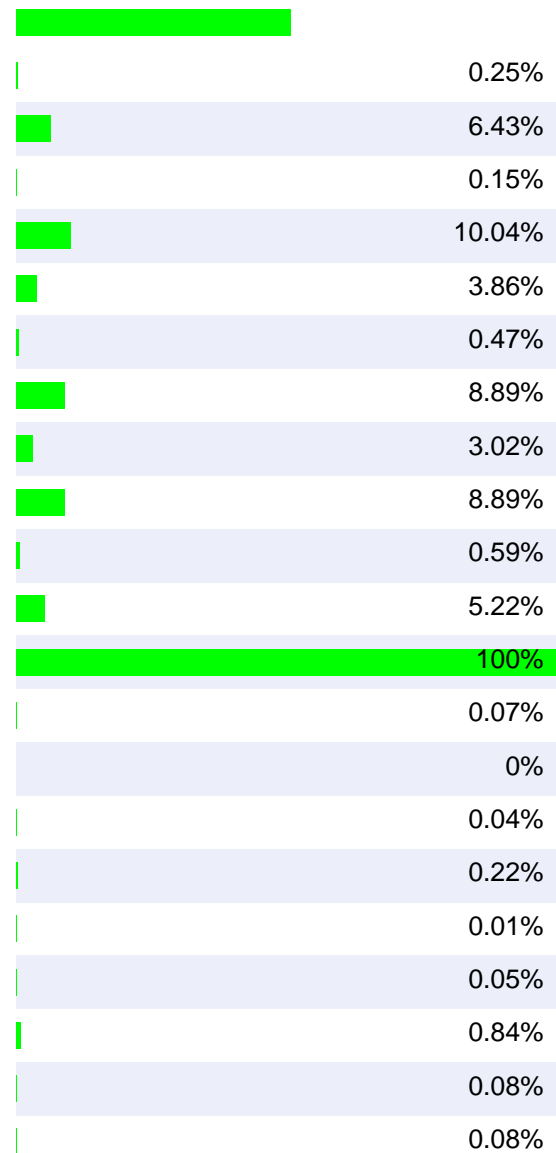
Masonicare

Based on Spending Breakdown by Claim

	0.07%	0.13%
	11.4%	10.18%
	0.09%	0.09%
	10.17%	10%
	4.79%	4.08%
	0.8%	0.37%
	7.75%	8.26%
	1.82%	2.5%
	14.37%	12.07%
	0.38%	0.42%
	5.48%	5.09%
	100%	100%
	0.08%	0.07%
	0%	0%
	0%	0.02%
	0.08%	0.16%
	0.01%	0.02%
	0.02%	0.03%
	0.71%	0.78%
	0.03%	0.05%
	0.19%	0.05%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
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MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH	070021	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility

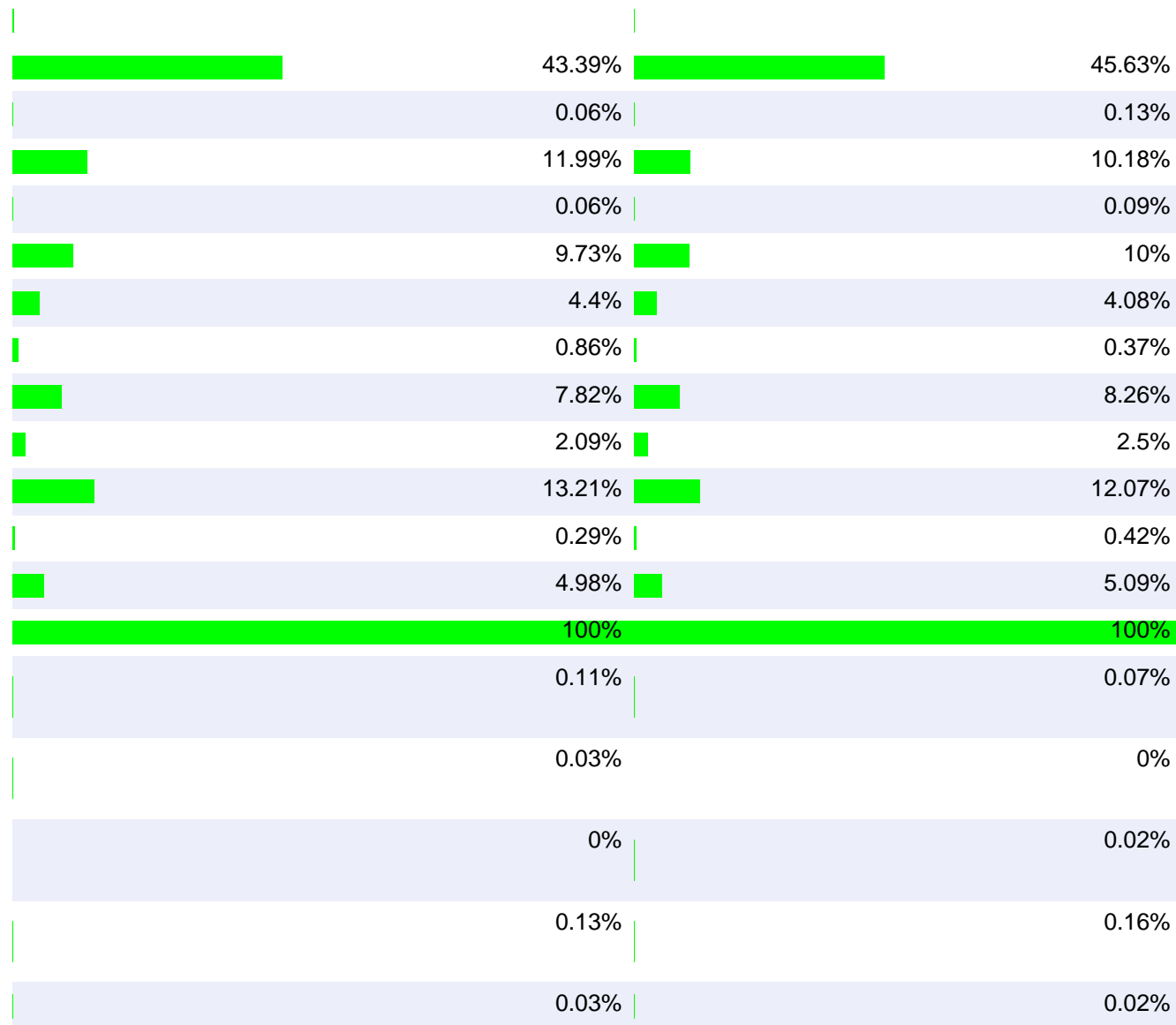
Masonicare

Based on Spending Breakdown by Claim

\$8021.00	\$8735.00	\$9399.00
\$10.00	\$24.00	\$46.00
\$2217.00	\$1949.00	\$1190.00
\$11.00	\$18.00	\$27.00
\$1799.00	\$1915.00	\$1857.00
\$813.00	\$781.00	\$715.00
\$158.00	\$70.00	\$88.00
\$1445.00	\$1581.00	\$1645.00
\$386.00	\$479.00	\$558.00
\$2442.00	\$2310.00	\$1646.00
\$53.00	\$80.00	\$110.00
\$921.00	\$974.00	\$966.00
\$18485.00	\$19142.00	\$18506.00
\$18.00	\$13.00	\$14.00
\$4.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$21.00	\$31.00	\$40.00
\$4.00	\$3.00	\$3.00

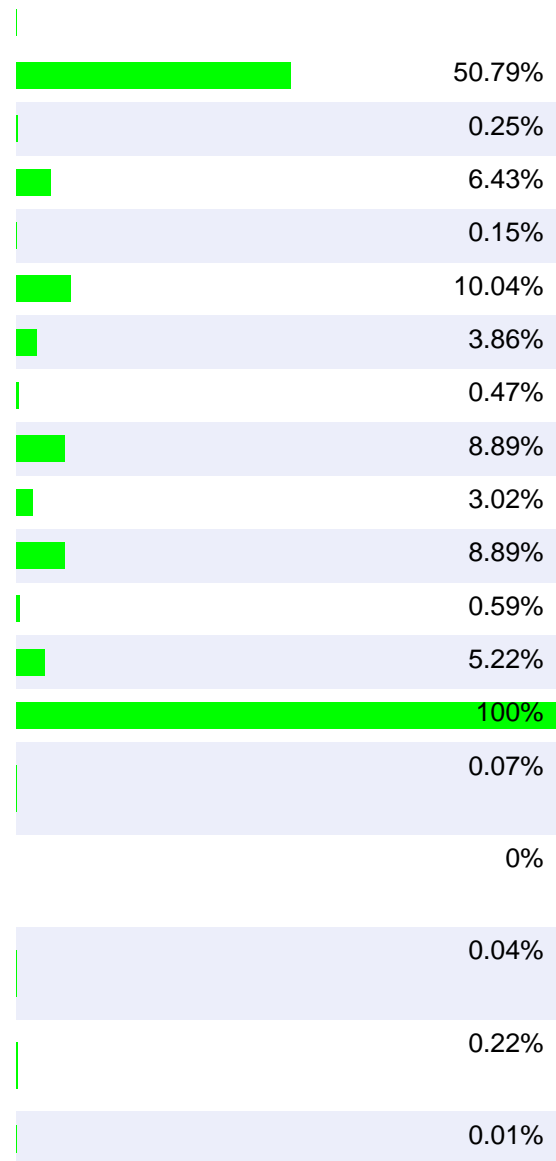
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

HOSP		
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT

Masonicare

Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient

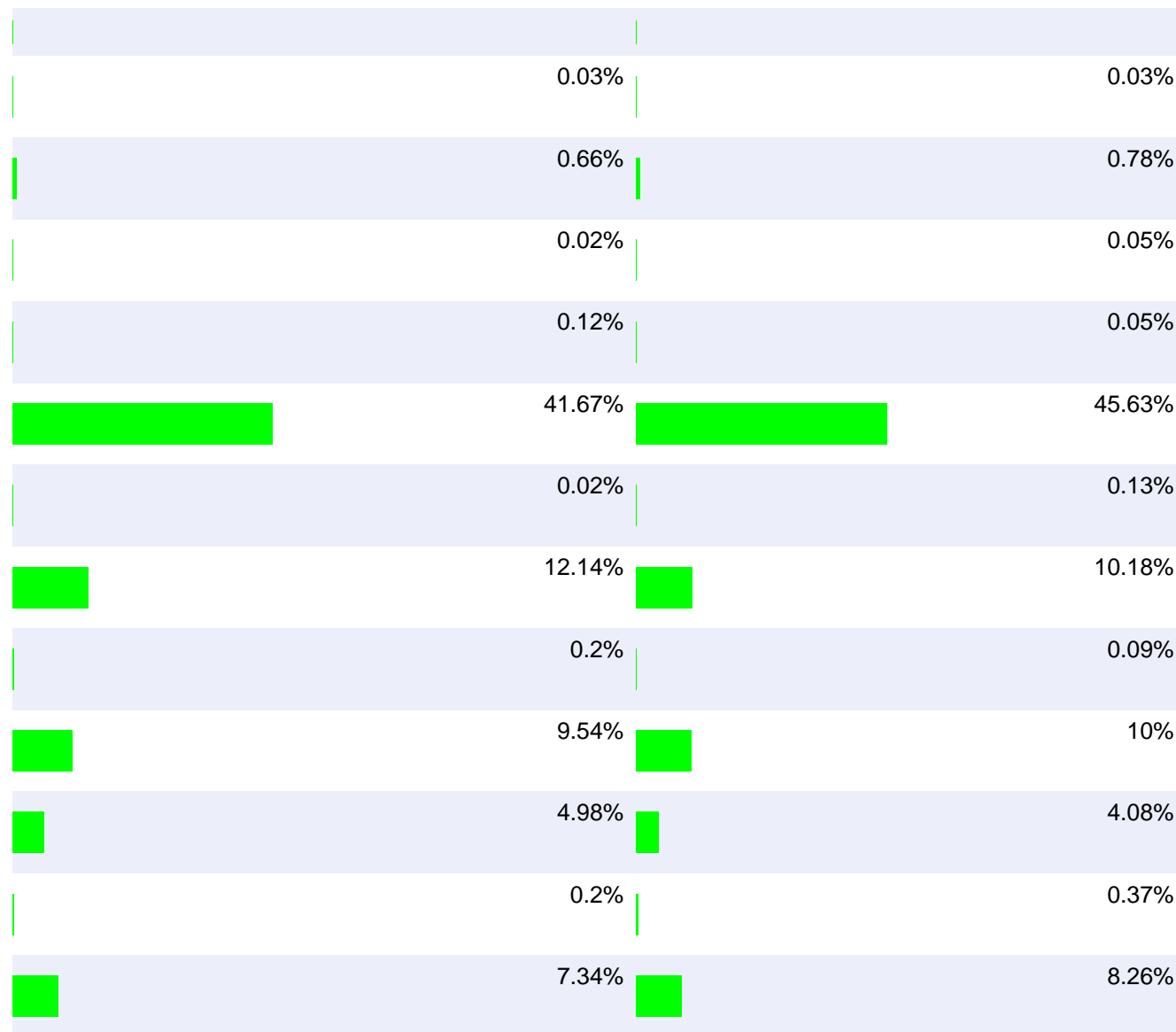
Masonicare

Based on Spending Breakdown by Claim

\$5.00	\$7.00	\$9.00
\$106.00	\$150.00	\$155.00
\$3.00	\$9.00	\$14.00
\$19.00	\$9.00	\$16.00
\$6718.00	\$8735.00	\$9399.00
\$4.00	\$24.00	\$46.00
\$1957.00	\$1949.00	\$1190.00
\$32.00	\$18.00	\$27.00
\$1538.00	\$1915.00	\$1857.00
\$803.00	\$781.00	\$715.00
\$33.00	\$70.00	\$88.00
\$1183.00	\$1581.00	\$1645.00

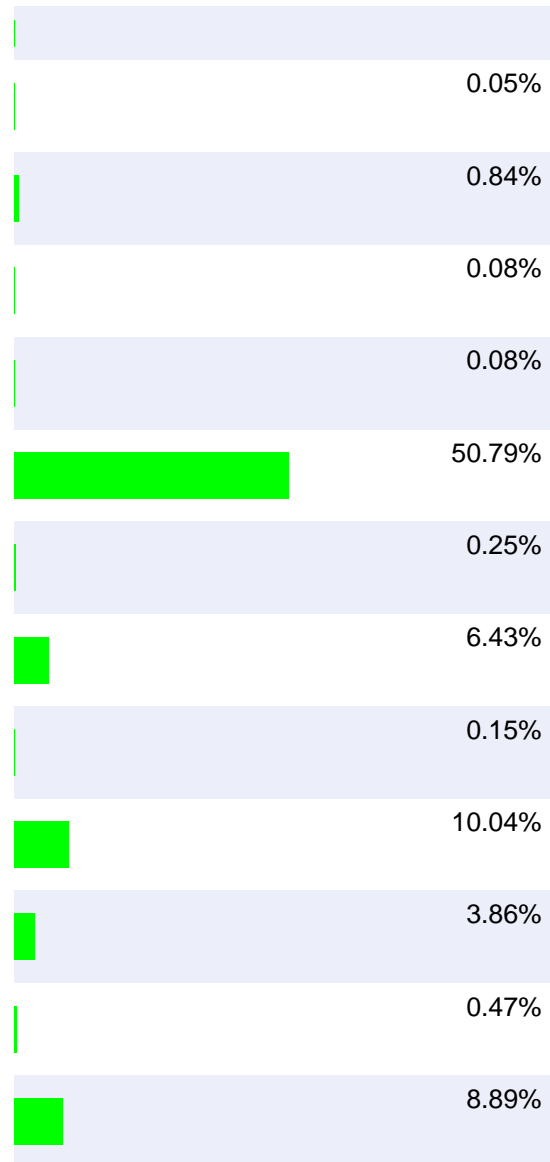
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment

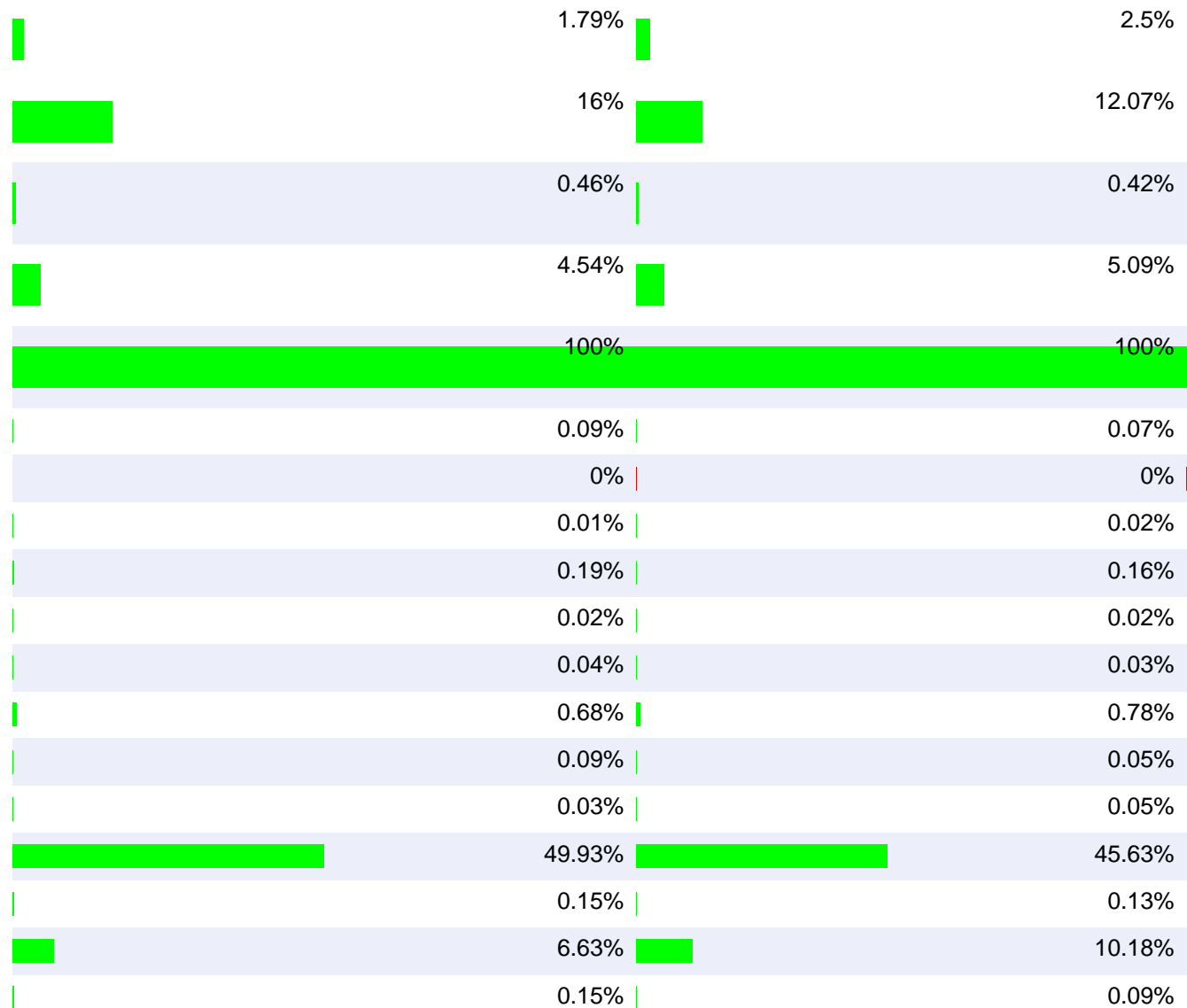
Masonicare

Based on Spending Breakdown by Claim

\$289.00	\$479.00	\$558.00
\$2579.00	\$2310.00	\$1646.00
\$74.00	\$80.00	\$110.00
\$732.00	\$974.00	\$966.00
\$16121.00	\$19142.00	\$18506.00
\$18.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$1.00	\$4.00	\$7.00
\$36.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$130.00	\$150.00	\$155.00
\$18.00	\$9.00	\$14.00
\$7.00	\$9.00	\$16.00
\$9514.00	\$8735.00	\$9399.00
\$28.00	\$24.00	\$46.00
\$1263.00	\$1949.00	\$1190.00
\$29.00	\$18.00	\$27.00

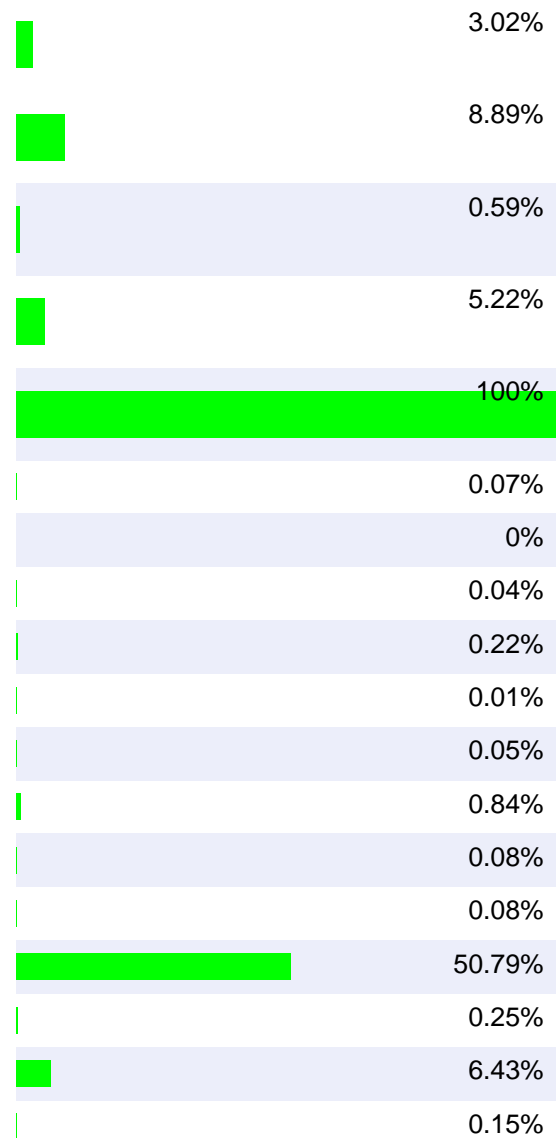
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
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WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment

















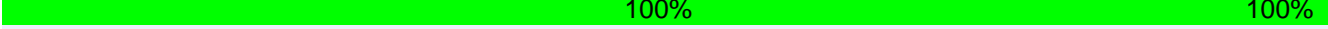



























Masonicare

Based on Spending Breakdown by Claim

	\$1833.00	\$1915.00	\$1857.00
	\$720.00	\$781.00	\$715.00
	\$74.00	\$70.00	\$88.00
	\$1988.00	\$1581.00	\$1645.00
	\$695.00	\$479.00	\$558.00
	\$1611.00	\$2310.00	\$1646.00
	\$99.00	\$80.00	\$110.00
	\$980.00	\$974.00	\$966.00
	\$19055.00	\$19142.00	\$18506.00
	\$12.00	\$13.00	\$14.00
	\$0.00	\$0.00	\$1.00
	\$4.00	\$4.00	\$7.00
	\$51.00	\$31.00	\$40.00
	\$2.00	\$3.00	\$3.00
	\$10.00	\$7.00	\$9.00
	\$144.00	\$150.00	\$155.00
	\$8.00	\$9.00	\$14.00
	\$3.00	\$9.00	\$16.00
	\$8381.00	\$8735.00	\$9399.00
	\$13.00	\$24.00	\$46.00
	\$1698.00	\$1949.00	\$1190.00
	\$18.00	\$18.00	\$27.00

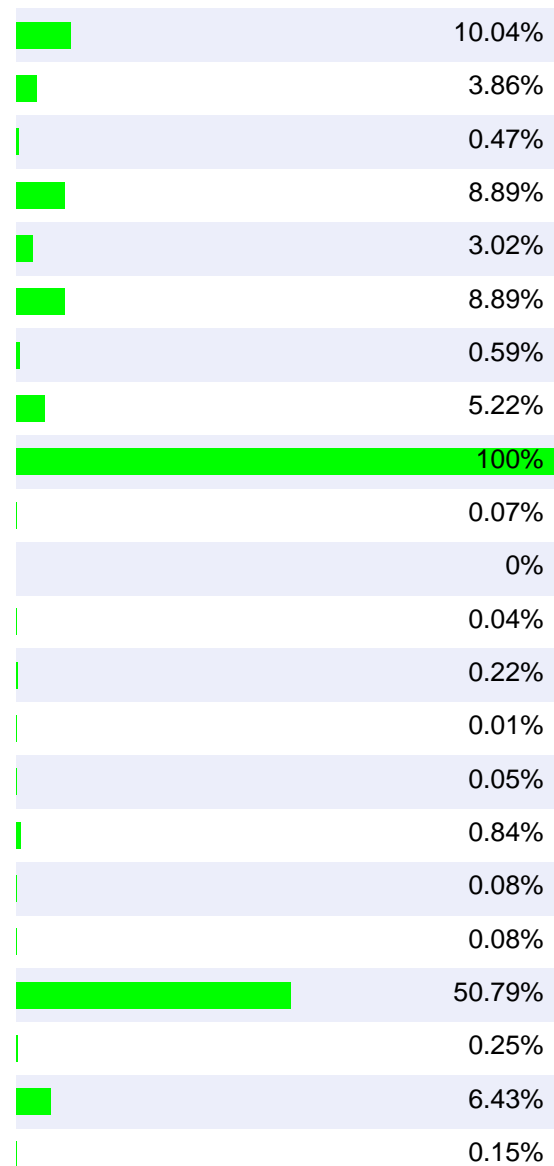
Masonicare

Based on Spending Breakdown by Claim

	9.62%		10%
	3.78%		4.08%
	0.39%		0.37%
	10.44%		8.26%
	3.65%		2.5%
	8.46%		12.07%
	0.52%		0.42%
	5.14%		5.09%
	100%		100%
	0.07%		0.07%
	0%		0%
	0.02%		0.02%
	0.27%		0.16%
	0.01%		0.02%
	0.06%		0.03%
	0.77%		0.78%
	0.04%		0.05%
	0.02%		0.05%
	44.83%		45.63%
	0.07%		0.13%
	9.08%		10.18%
	0.09%		0.09%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
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HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility

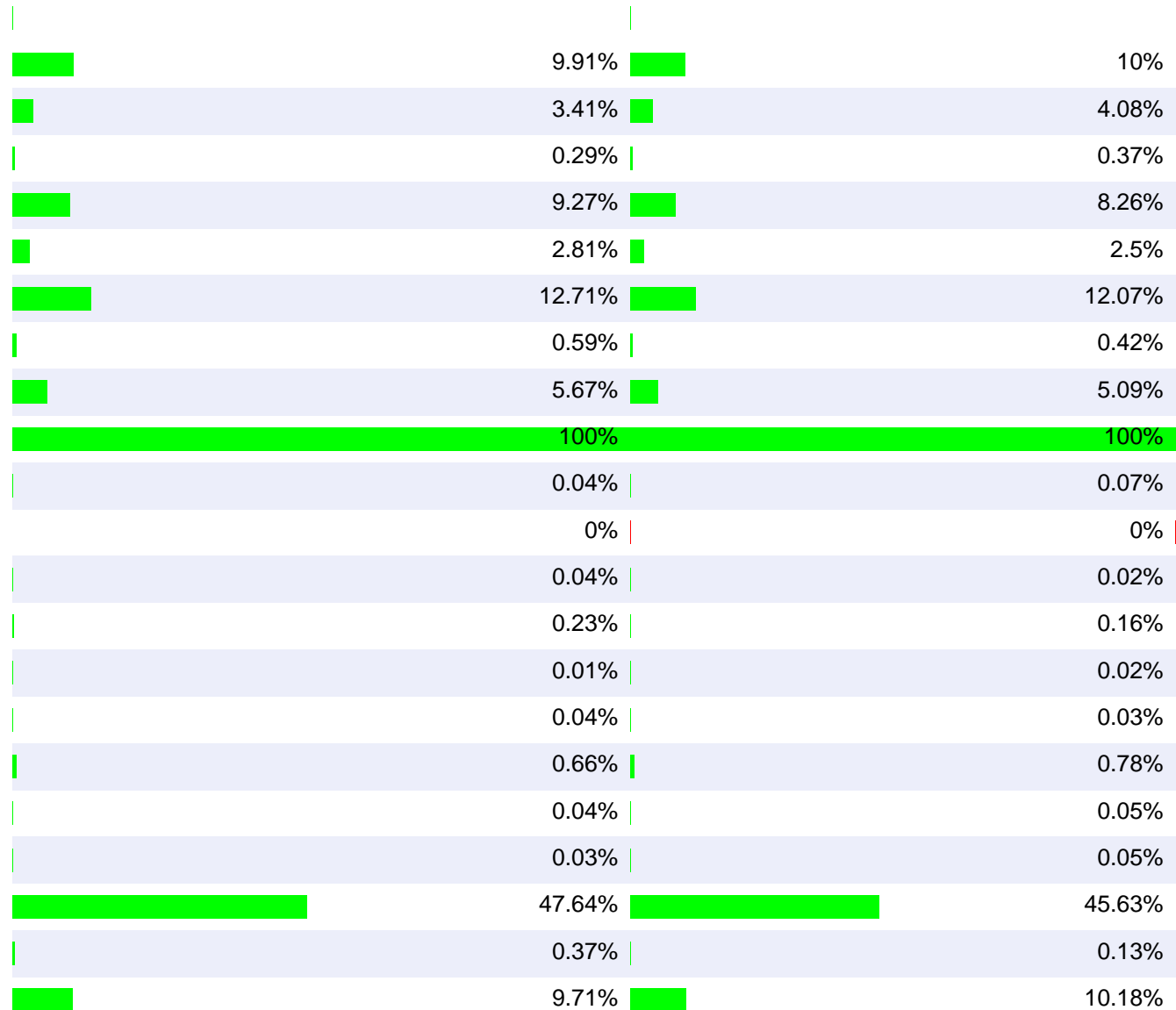
Masonicare

Based on Spending Breakdown by Claim

\$1852.00	\$1915.00	\$1857.00
\$638.00	\$781.00	\$715.00
\$55.00	\$70.00	\$88.00
\$1733.00	\$1581.00	\$1645.00
\$526.00	\$479.00	\$558.00
\$2377.00	\$2310.00	\$1646.00
\$110.00	\$80.00	\$110.00
\$1059.00	\$974.00	\$966.00
\$18695.00	\$19142.00	\$18506.00
\$9.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$8.00	\$4.00	\$7.00
\$49.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$9.00	\$7.00	\$9.00
\$142.00	\$150.00	\$155.00
\$8.00	\$9.00	\$14.00
\$6.00	\$9.00	\$16.00
\$10225.00	\$8735.00	\$9399.00
\$79.00	\$24.00	\$46.00
\$2085.00	\$1949.00	\$1190.00

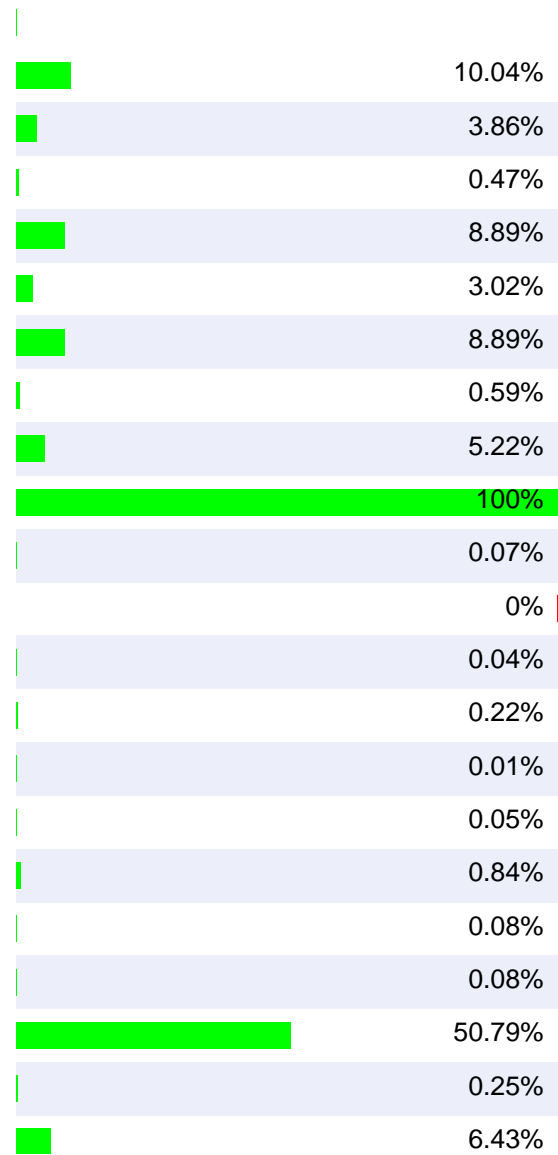
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
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HARTFORD HOSPITAL	070025	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
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MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient

Masonicare

Based on Spending Breakdown by Claim

\$21.00	\$18.00	\$27.00
\$2333.00	\$1915.00	\$1857.00
\$783.00	\$781.00	\$715.00
\$50.00	\$70.00	\$88.00
\$1759.00	\$1581.00	\$1645.00
\$461.00	\$479.00	\$558.00
\$2389.00	\$2310.00	\$1646.00
\$88.00	\$80.00	\$110.00
\$959.00	\$974.00	\$966.00
\$21465.00	\$19142.00	\$18506.00
\$19.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$16.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$162.00	\$150.00	\$155.00
\$4.00	\$9.00	\$14.00
\$5.00	\$9.00	\$16.00
\$7951.00	\$8735.00	\$9399.00
\$13.00	\$24.00	\$46.00

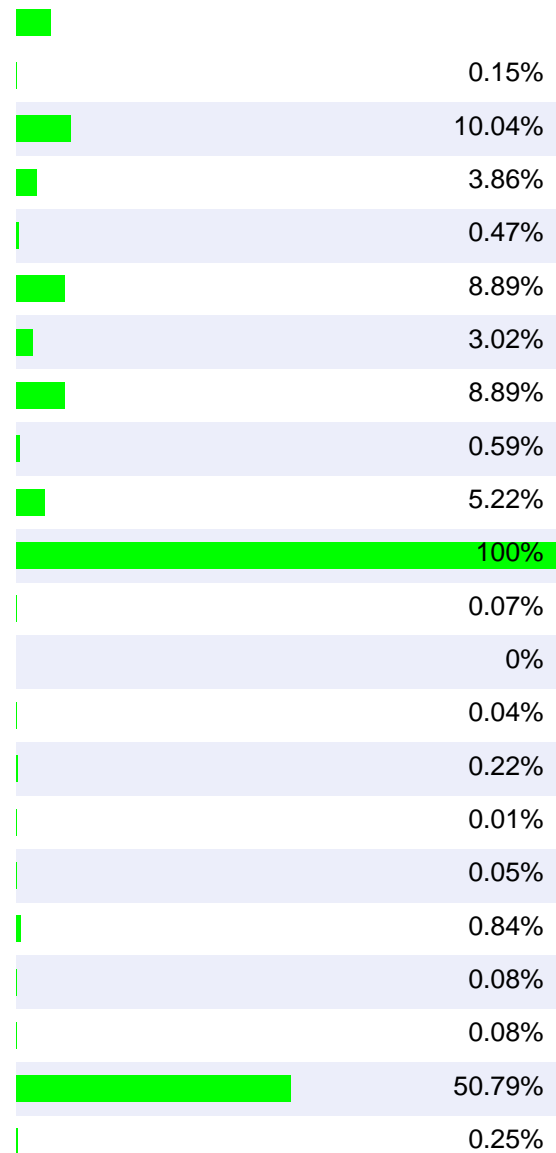
Masonicare

Based on Spending Breakdown by Claim

	0.1%	0.09%
	10.87%	10%
	3.65%	4.08%
	0.23%	0.37%
	8.19%	8.26%
	2.15%	2.5%
	11.13%	12.07%
	0.41%	0.42%
	4.47%	5.09%
	100%	100%
	0.1%	0.07%
	0%	0%
	0%	0.02%
	0.09%	0.16%
	0.01%	0.02%
	0.03%	0.03%
	0.85%	0.78%
	0.02%	0.05%
	0.02%	0.05%
	41.86%	45.63%
	0.07%	0.13%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
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ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient

Masonicare

Based on Spending Breakdown by Claim

\$2504.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00
\$1733.00	\$1915.00	\$1857.00
\$1012.00	\$781.00	\$715.00
\$142.00	\$70.00	\$88.00
\$1181.00	\$1581.00	\$1645.00
\$391.00	\$479.00	\$558.00
\$2883.00	\$2310.00	\$1646.00
\$67.00	\$80.00	\$110.00
\$886.00	\$974.00	\$966.00
\$18996.00	\$19142.00	\$18506.00
\$8.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$9.00	\$4.00	\$7.00
\$24.00	\$31.00	\$40.00
\$5.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$125.00	\$150.00	\$155.00
\$17.00	\$9.00	\$14.00
\$7.00	\$9.00	\$16.00
\$8662.00	\$8735.00	\$9399.00

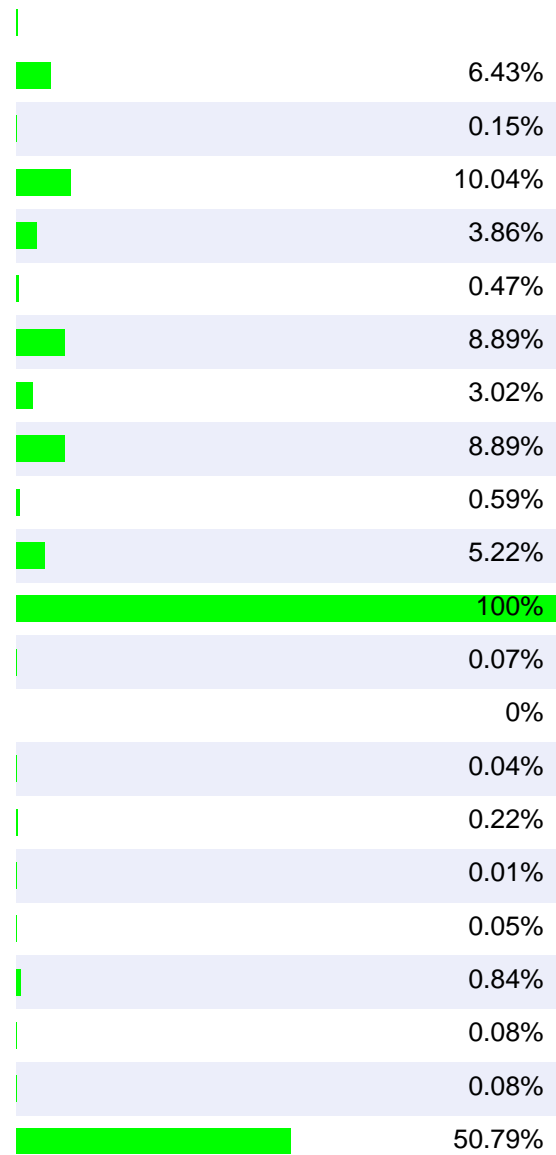
Masonicare

Based on Spending Breakdown by Claim

	13.18%	10.18%
	0.11%	0.09%
	9.12%	10%
	5.33%	4.08%
	0.75%	0.37%
	6.22%	8.26%
	2.06%	2.5%
	15.18%	12.07%
	0.35%	0.42%
	4.66%	5.09%
	100%	100%
	0.04%	0.07%
	0%	0%
	0.05%	0.02%
	0.12%	0.16%
	0.03%	0.02%
	0.04%	0.03%
	0.65%	0.78%
	0.09%	0.05%
	0.04%	0.05%
	44.71%	45.63%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice

Masonicare

Based on Spending Breakdown by Claim

\$12.00	\$24.00	\$46.00
\$1977.00	\$1949.00	\$1190.00
\$18.00	\$18.00	\$27.00
\$2200.00	\$1915.00	\$1857.00
\$758.00	\$781.00	\$715.00
\$55.00	\$70.00	\$88.00
\$1520.00	\$1581.00	\$1645.00
\$487.00	\$479.00	\$558.00
\$2293.00	\$2310.00	\$1646.00
\$89.00	\$80.00	\$110.00
\$1102.00	\$974.00	\$966.00
\$19374.00	\$19142.00	\$18506.00
\$8.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$1.00	\$4.00	\$7.00
\$19.00	\$31.00	\$40.00
\$4.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$163.00	\$150.00	\$155.00
\$4.00	\$9.00	\$14.00
\$1.00	\$9.00	\$16.00

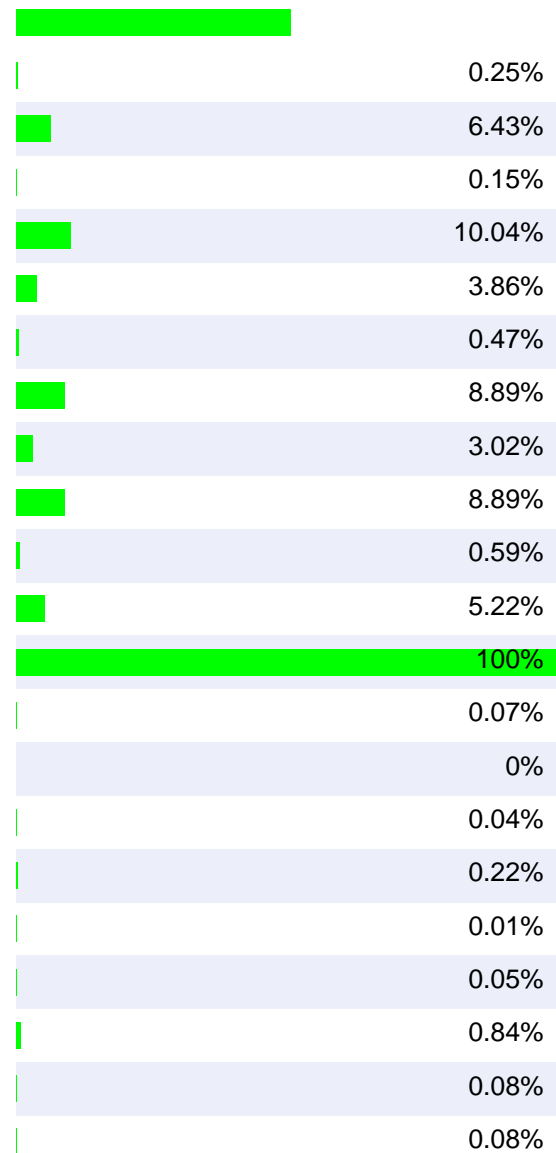
Masonicare

Based on Spending Breakdown by Claim

	0.06%	0.13%
	10.2%	10.18%
	0.09%	0.09%
	11.36%	10%
	3.91%	4.08%
	0.28%	0.37%
	7.85%	8.26%
	2.51%	2.5%
	11.84%	12.07%
	0.46%	0.42%
	5.69%	5.09%
	100%	100%
	0.05%	0.07%
	0%	0%
	0.01%	0.02%
	0.1%	0.16%
	0.02%	0.02%
	0.04%	0.03%
	0.89%	0.78%
	0.02%	0.05%
	0.01%	0.05%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

[illegible]

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency

Masonicare

Based on Spending Breakdown by Claim

\$7459.00	\$8735.00	\$9399.00
\$7.00	\$24.00	\$46.00
\$2406.00	\$1949.00	\$1190.00
\$18.00	\$18.00	\$27.00
\$1654.00	\$1915.00	\$1857.00
\$797.00	\$781.00	\$715.00
\$66.00	\$70.00	\$88.00
\$1453.00	\$1581.00	\$1645.00
\$468.00	\$479.00	\$558.00
\$2794.00	\$2310.00	\$1646.00
\$77.00	\$80.00	\$110.00
\$856.00	\$974.00	\$966.00
\$18263.00	\$19142.00	\$18506.00
\$5.00	\$13.00	\$14.00
\$4.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$20.00	\$31.00	\$40.00
\$5.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$109.00	\$150.00	\$155.00
\$9.00	\$9.00	\$14.00

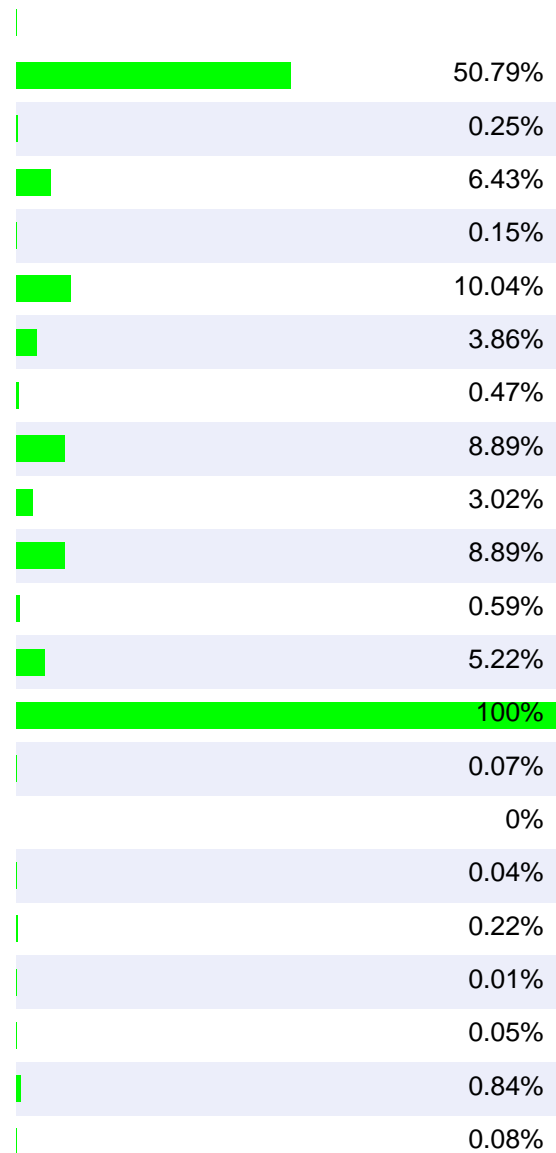
Masonicare

Based on Spending Breakdown by Claim

	40.85%	45.63%
	0.04%	0.13%
	13.17%	10.18%
	0.1%	0.09%
	9.05%	10%
	4.36%	4.08%
	0.36%	0.37%
	7.96%	8.26%
	2.56%	2.5%
	15.3%	12.07%
	0.42%	0.42%
	4.69%	5.09%
	100%	100%
	0.03%	0.07%
	0.02%	0%
	0%	0.02%
	0.12%	0.16%
	0.03%	0.02%
	0.04%	0.03%
	0.63%	0.78%
	0.05%	0.05%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
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GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier

Masonicare

Based on Spending Breakdown by Claim

\$6.00	\$9.00	\$16.00
\$7363.00	\$8735.00	\$9399.00
\$10.00	\$24.00	\$46.00
\$2037.00	\$1949.00	\$1190.00
\$14.00	\$18.00	\$27.00
\$1712.00	\$1915.00	\$1857.00
\$648.00	\$781.00	\$715.00
\$132.00	\$70.00	\$88.00
\$1525.00	\$1581.00	\$1645.00
\$382.00	\$479.00	\$558.00
\$2451.00	\$2310.00	\$1646.00
\$71.00	\$80.00	\$110.00
\$918.00	\$974.00	\$966.00
\$17430.00	\$19142.00	\$18506.00
\$10.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$30.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$8.00	\$7.00	\$9.00
\$123.00	\$150.00	\$155.00

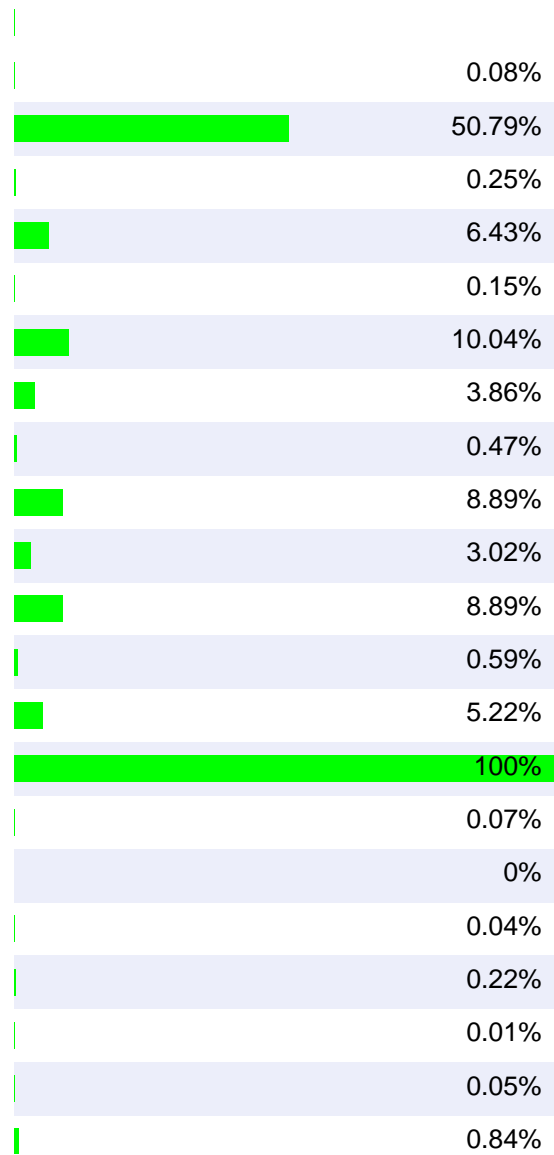
Masonicare

Based on Spending Breakdown by Claim

	0.03%	0.05%
	42.24%	45.63%
	0.06%	0.13%
	11.69%	10.18%
	0.08%	0.09%
	9.82%	10%
	3.72%	4.08%
	0.75%	0.37%
	8.75%	8.26%
	2.19%	2.5%
	14.06%	12.07%
	0.41%	0.42%
	5.27%	5.09%
	100%	100%
	0.05%	0.07%
	0%	0%
	0%	0.02%
	0.16%	0.16%
	0.01%	0.02%
	0.04%	0.03%
	0.67%	0.78%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment

Masonicare

Based on Spending Breakdown by Claim

\$10.00	\$9.00	\$14.00
\$10.00	\$9.00	\$16.00
\$8214.00	\$8735.00	\$9399.00
\$12.00	\$24.00	\$46.00
\$2104.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00
\$1861.00	\$1915.00	\$1857.00
\$594.00	\$781.00	\$715.00
\$88.00	\$70.00	\$88.00
\$1421.00	\$1581.00	\$1645.00
\$536.00	\$479.00	\$558.00
\$2247.00	\$2310.00	\$1646.00
\$94.00	\$80.00	\$110.00
\$960.00	\$974.00	\$966.00
\$18343.00	\$19142.00	\$18506.00
\$21.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$3.00	\$4.00	\$7.00
\$46.00	\$31.00	\$40.00
\$1.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00

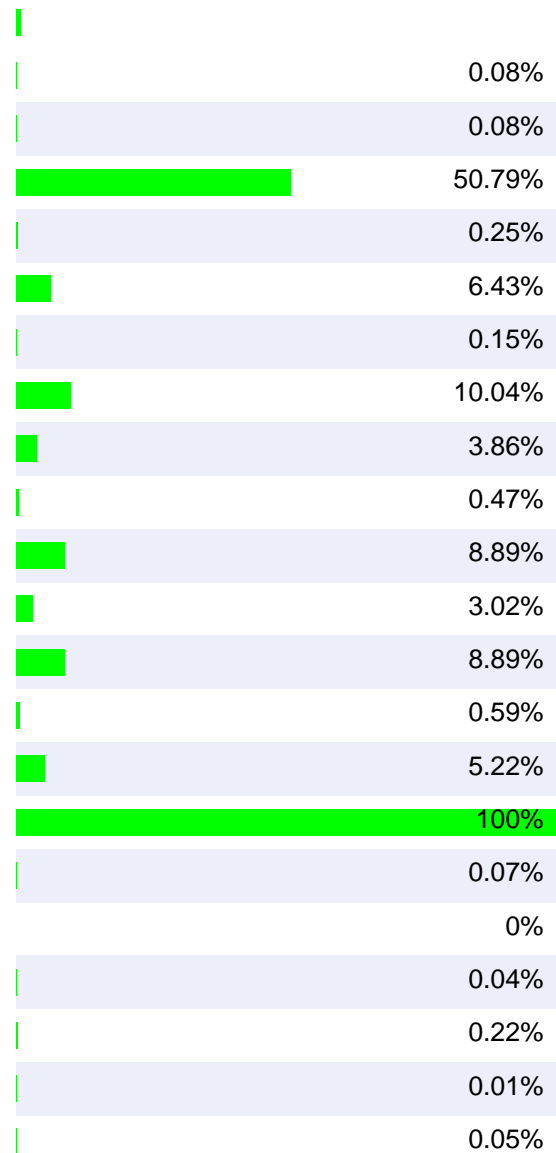
Masonicare

Based on Spending Breakdown by Claim

	0.06%	0.05%
	0.06%	0.05%
	44.78%	45.63%
	0.06%	0.13%
	11.47%	10.18%
	0.11%	0.09%
	10.15%	10%
	3.24%	4.08%
	0.48%	0.37%
	7.74%	8.26%
	2.92%	2.5%
	12.25%	12.07%
	0.51%	0.42%
	5.23%	5.09%
	100%	100%
	0.11%	0.07%
	0%	0%
	0.02%	0.02%
	0.24%	0.16%
	0.01%	0.02%
	0.03%	0.03%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT

Masonicare

Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient

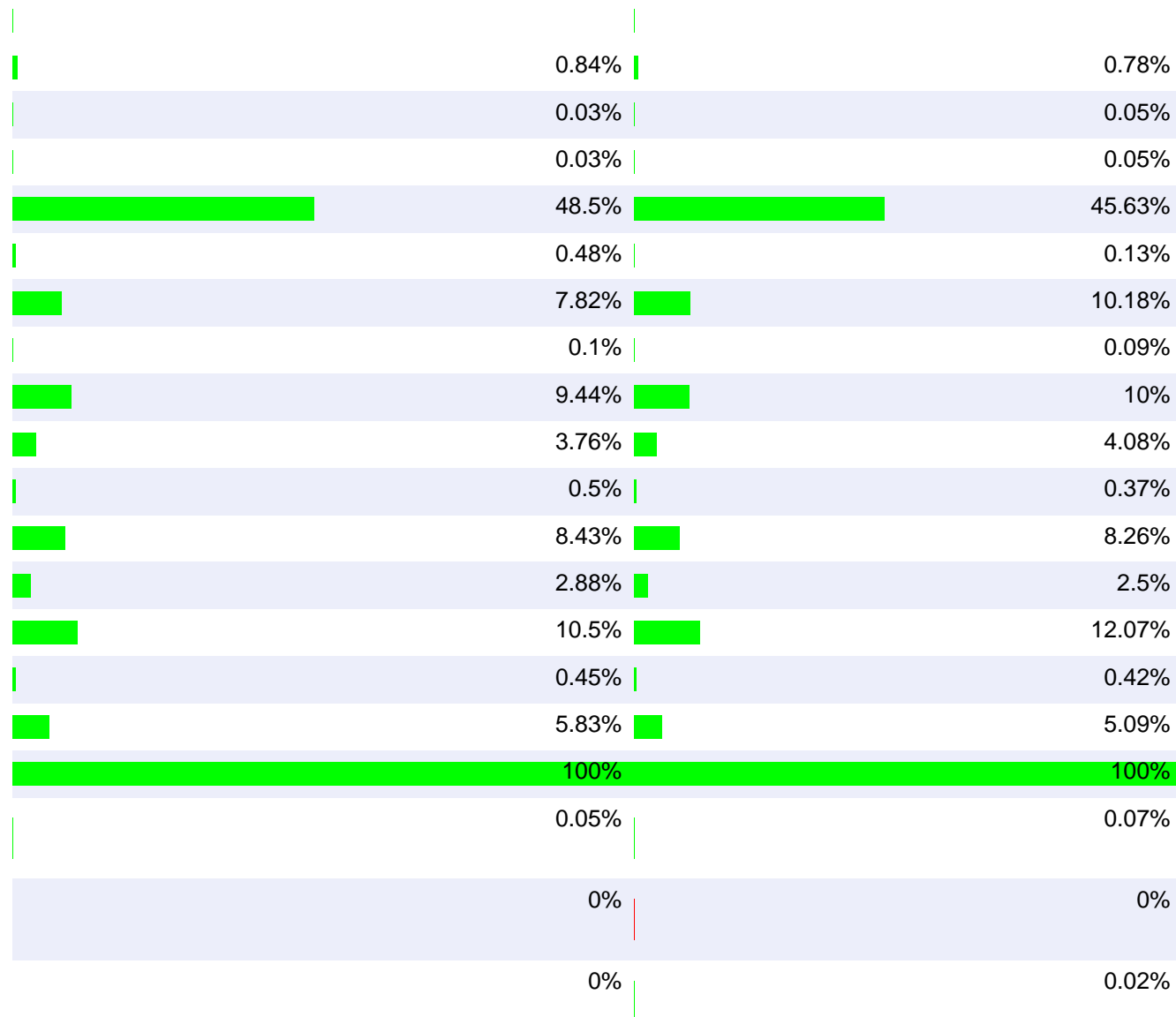
Masonicare

Based on Spending Breakdown by Claim

\$166.00	\$150.00	\$155.00
\$6.00	\$9.00	\$14.00
\$6.00	\$9.00	\$16.00
\$9531.00	\$8735.00	\$9399.00
\$93.00	\$24.00	\$46.00
\$1537.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00
\$1855.00	\$1915.00	\$1857.00
\$739.00	\$781.00	\$715.00
\$98.00	\$70.00	\$88.00
\$1656.00	\$1581.00	\$1645.00
\$565.00	\$479.00	\$558.00
\$2064.00	\$2310.00	\$1646.00
\$88.00	\$80.00	\$110.00
\$1146.00	\$974.00	\$966.00
\$19651.00	\$19142.00	\$18506.00
\$8.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00

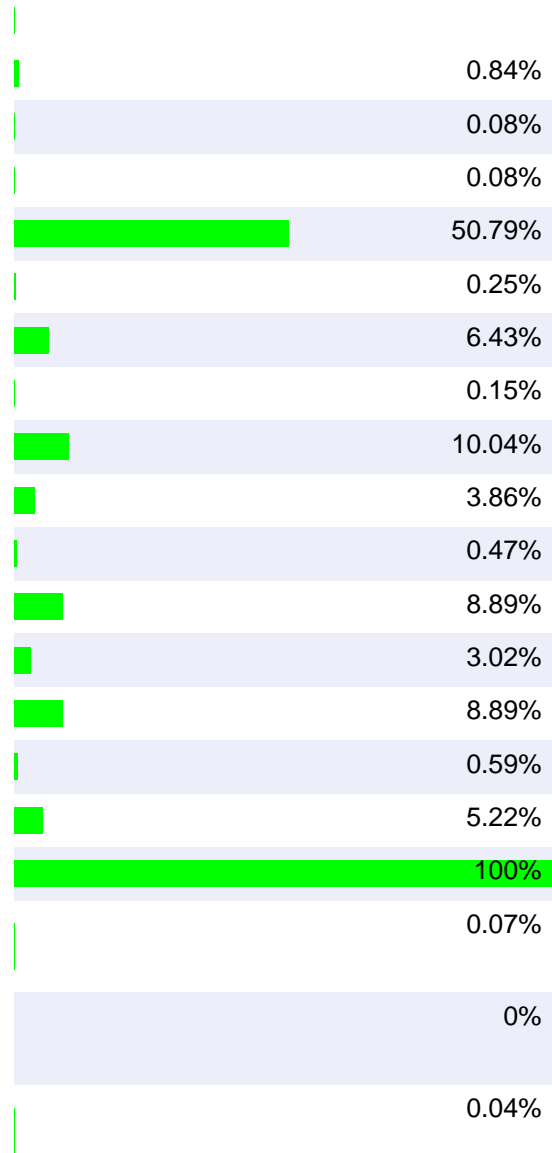
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

CONNECTICUT

THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
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Masonicare

Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency

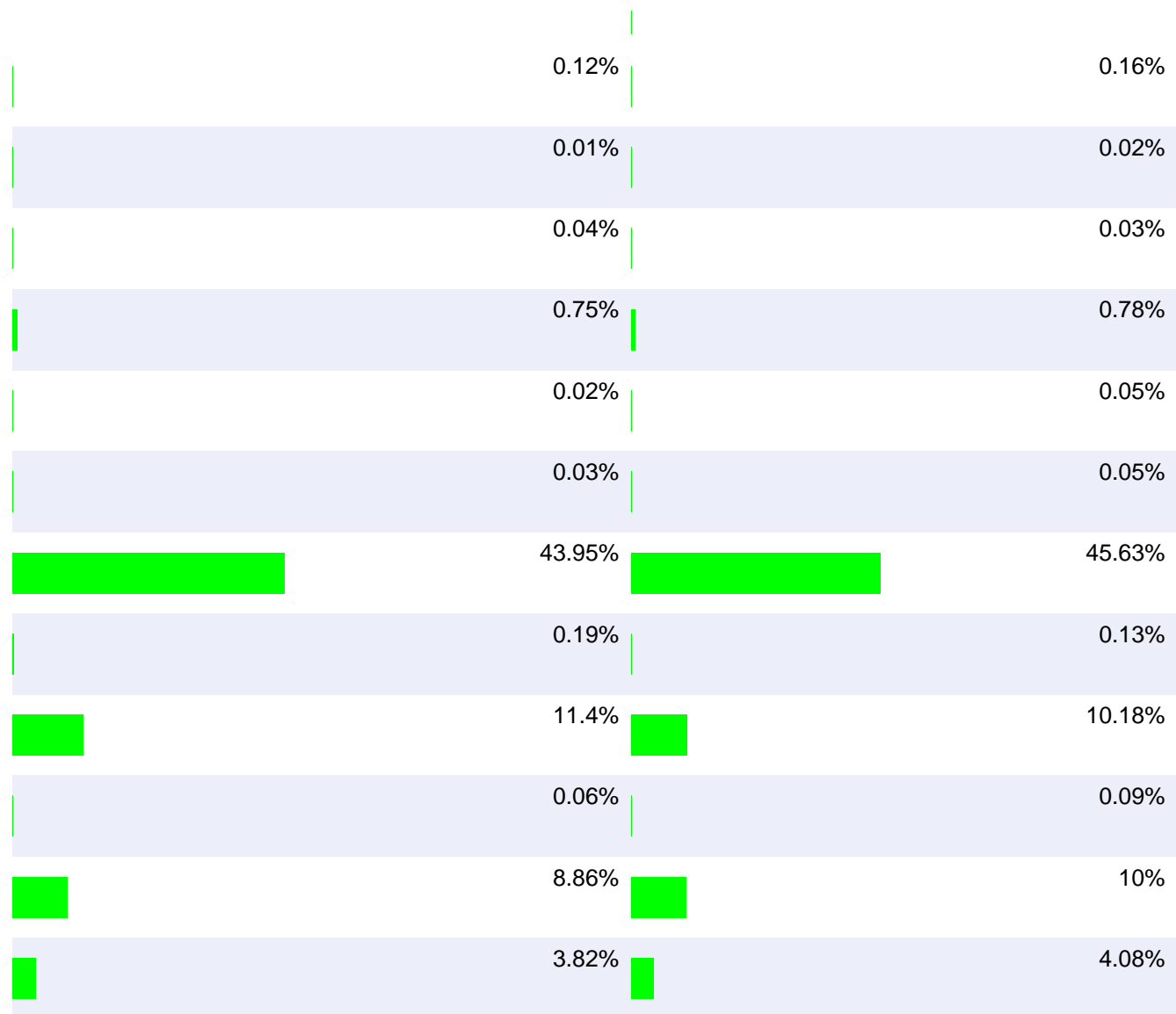
Masonicare

Based on Spending Breakdown by Claim

	\$21.00	\$31.00	\$40.00
	\$2.00	\$3.00	\$3.00
	\$6.00	\$7.00	\$9.00
	\$128.00	\$150.00	\$155.00
	\$3.00	\$9.00	\$14.00
	\$5.00	\$9.00	\$16.00
	\$7544.00	\$8735.00	\$9399.00
	\$33.00	\$24.00	\$46.00
	\$1956.00	\$1949.00	\$1190.00
	\$11.00	\$18.00	\$27.00
	\$1521.00	\$1915.00	\$1857.00
	\$655.00	\$781.00	\$715.00

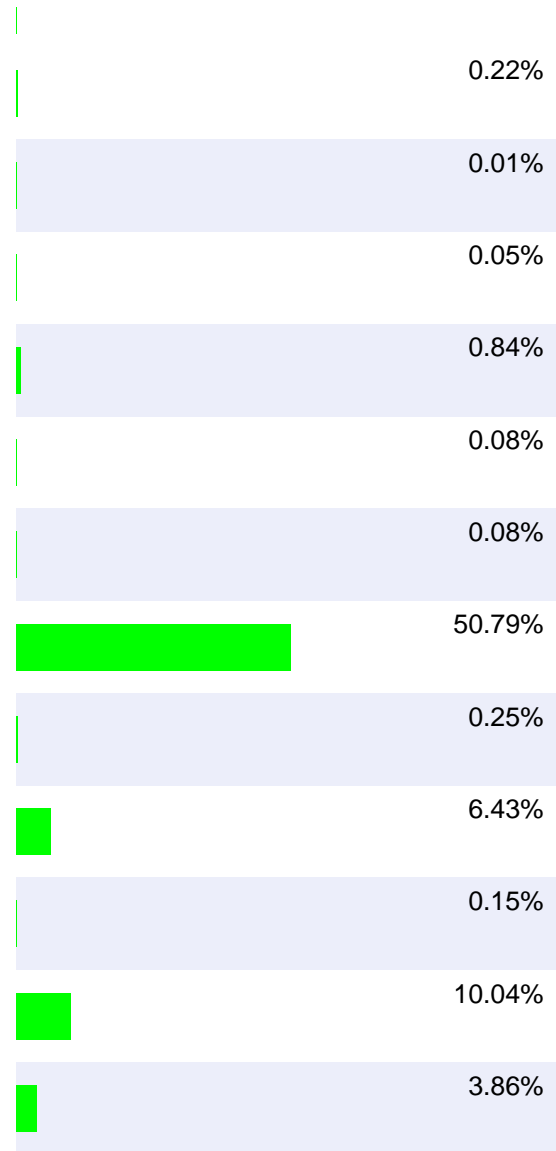
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT

Masonicare

Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice

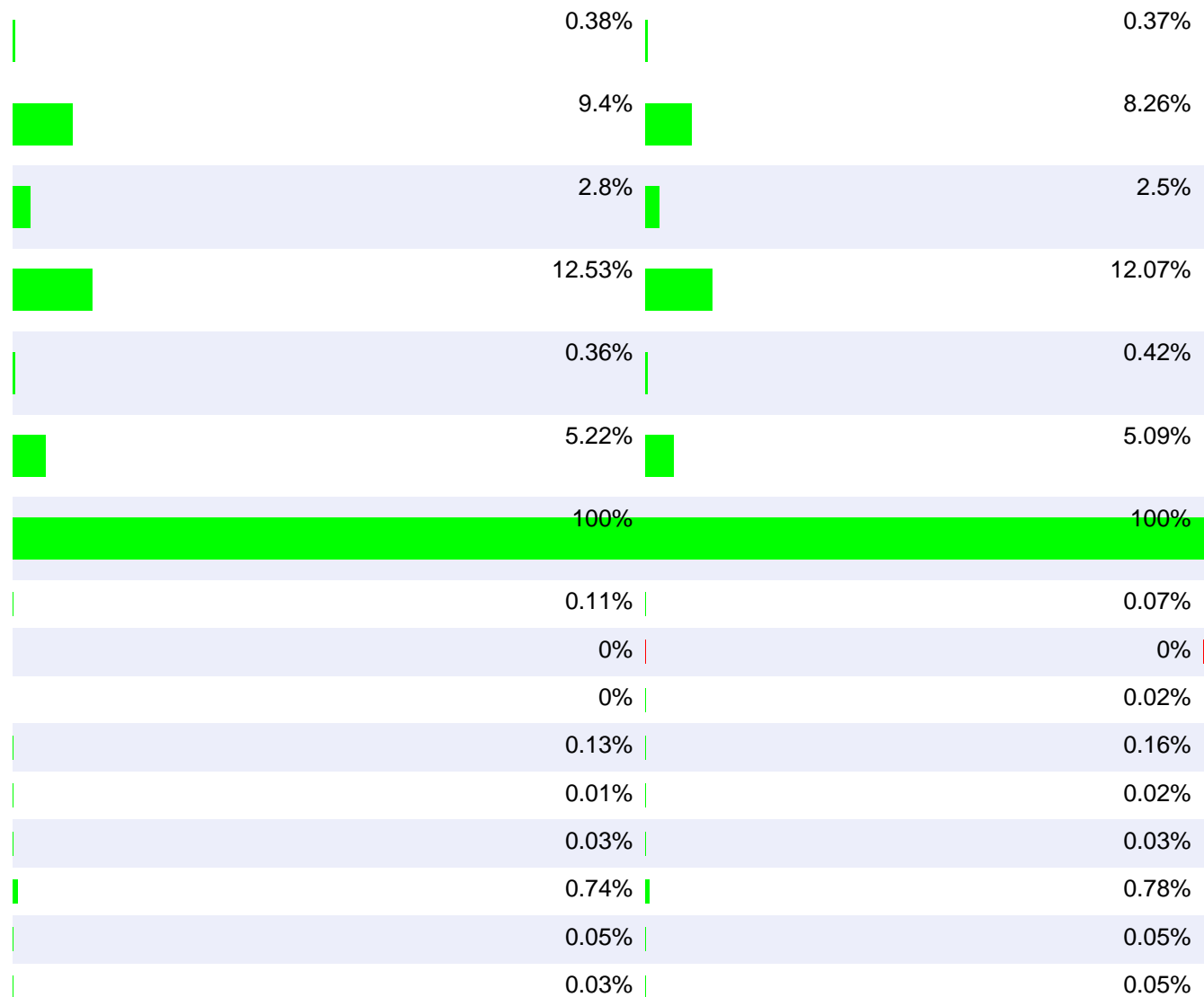
Masonicare

Based on Spending Breakdown by Claim

\$66.00	\$70.00	\$88.00
\$1613.00	\$1581.00	\$1645.00
\$481.00	\$479.00	\$558.00
\$2151.00	\$2310.00	\$1646.00
\$62.00	\$80.00	\$110.00
\$897.00	\$974.00	\$966.00
\$17164.00	\$19142.00	\$18506.00
\$22.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$27.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$146.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$6.00	\$9.00	\$16.00

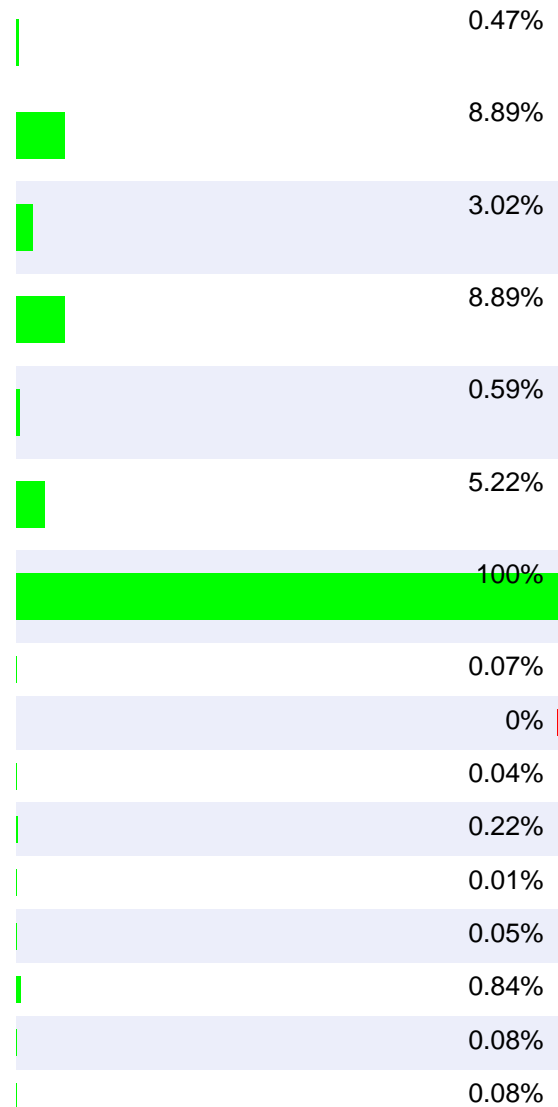
Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice


















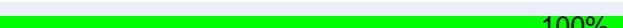
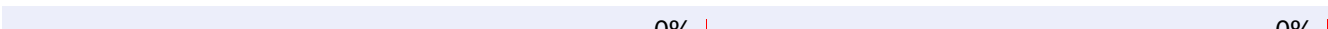











Masonicare

Based on Spending Breakdown by Claim

	\$9308.00	\$8735.00	\$9399.00
	\$19.00	\$24.00	\$46.00
	\$1892.00	\$1949.00	\$1190.00
	\$22.00	\$18.00	\$27.00
	\$1644.00	\$1915.00	\$1857.00
	\$953.00	\$781.00	\$715.00
	\$41.00	\$70.00	\$88.00
	\$1711.00	\$1581.00	\$1645.00
	\$651.00	\$479.00	\$558.00
	\$2277.00	\$2310.00	\$1646.00
	\$140.00	\$80.00	\$110.00
	\$852.00	\$974.00	\$966.00
	\$19729.00	\$19142.00	\$18506.00
	\$23.00	\$13.00	\$14.00
	\$0.00	\$0.00	\$1.00
	\$31.00	\$4.00	\$7.00
	\$140.00	\$31.00	\$40.00
	\$0.00	\$3.00	\$3.00
	\$8.00	\$7.00	\$9.00
	\$204.00	\$150.00	\$155.00
	\$15.00	\$9.00	\$14.00
	\$0.00	\$9.00	\$16.00

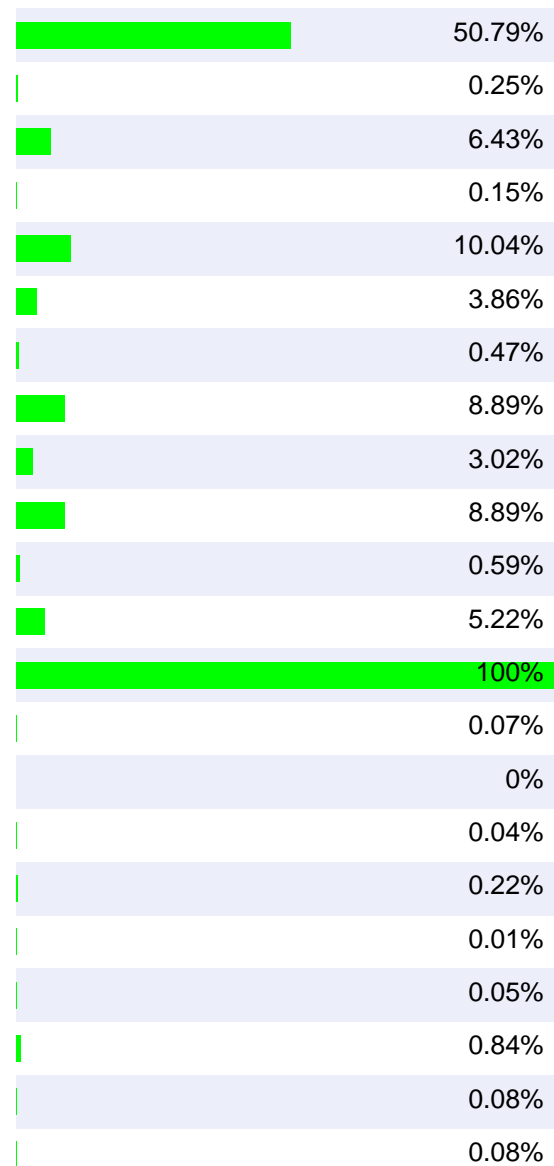
Masonicare

Based on Spending Breakdown by Claim

	47.18%		45.63%
	0.09%		0.13%
	9.59%		10.18%
	0.11%		0.09%
	8.33%		10%
	4.83%		4.08%
	0.21%		0.37%
	8.67%		8.26%
	3.3%		2.5%
	11.54%		12.07%
	0.71%		0.42%
	4.32%		5.09%
	100%		100%
	0.12%		0.07%
	0%		0%
	0.17%		0.02%
	0.76%		0.16%
	0%		0.02%
	0.04%		0.03%
	1.1%		0.78%
	0.08%		0.05%
	0%		0.05%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
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MASONIC HOME AND HOSPITAL	070039	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency

Masonicare

Based on Spending Breakdown by Claim

\$5534.00	\$8735.00	\$9399.00
\$267.00	\$24.00	\$46.00
\$3318.00	\$1949.00	\$1190.00
\$6.00	\$18.00	\$27.00
\$1156.00	\$1915.00	\$1857.00
\$852.00	\$781.00	\$715.00
\$242.00	\$70.00	\$88.00
\$1836.00	\$1581.00	\$1645.00
\$185.00	\$479.00	\$558.00
\$3521.00	\$2310.00	\$1646.00
\$26.00	\$80.00	\$110.00
\$1193.00	\$974.00	\$966.00
\$18555.00	\$19142.00	\$18506.00
\$26.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$18.00	\$31.00	\$40.00
\$0.00	\$3.00	\$3.00
\$0.00	\$7.00	\$9.00
\$91.00	\$150.00	\$155.00
\$0.00	\$9.00	\$14.00

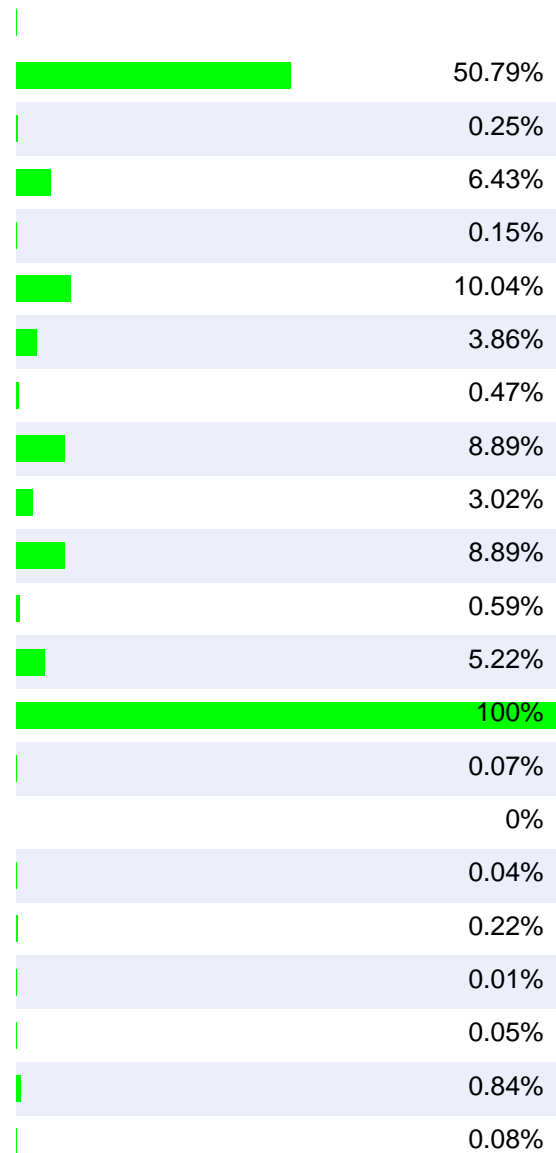
Masonicare

Based on Spending Breakdown by Claim

	29.82%	45.63%
	1.44%	0.13%
	17.88%	10.18%
	0.03%	0.09%
	6.23%	10%
	4.59%	4.08%
	1.3%	0.37%
	9.9%	8.26%
	1%	2.5%
	18.97%	12.07%
	0.14%	0.42%
	6.43%	5.09%
	100%	100%
	0.16%	0.07%
	0%	0%
	0%	0.02%
	0.11%	0.16%
	0%	0.02%
	0%	0.03%
	0.56%	0.78%
	0%	0.05%

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
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HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
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HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT

Masonicare

Based on Spending Breakdown by Claim

During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total

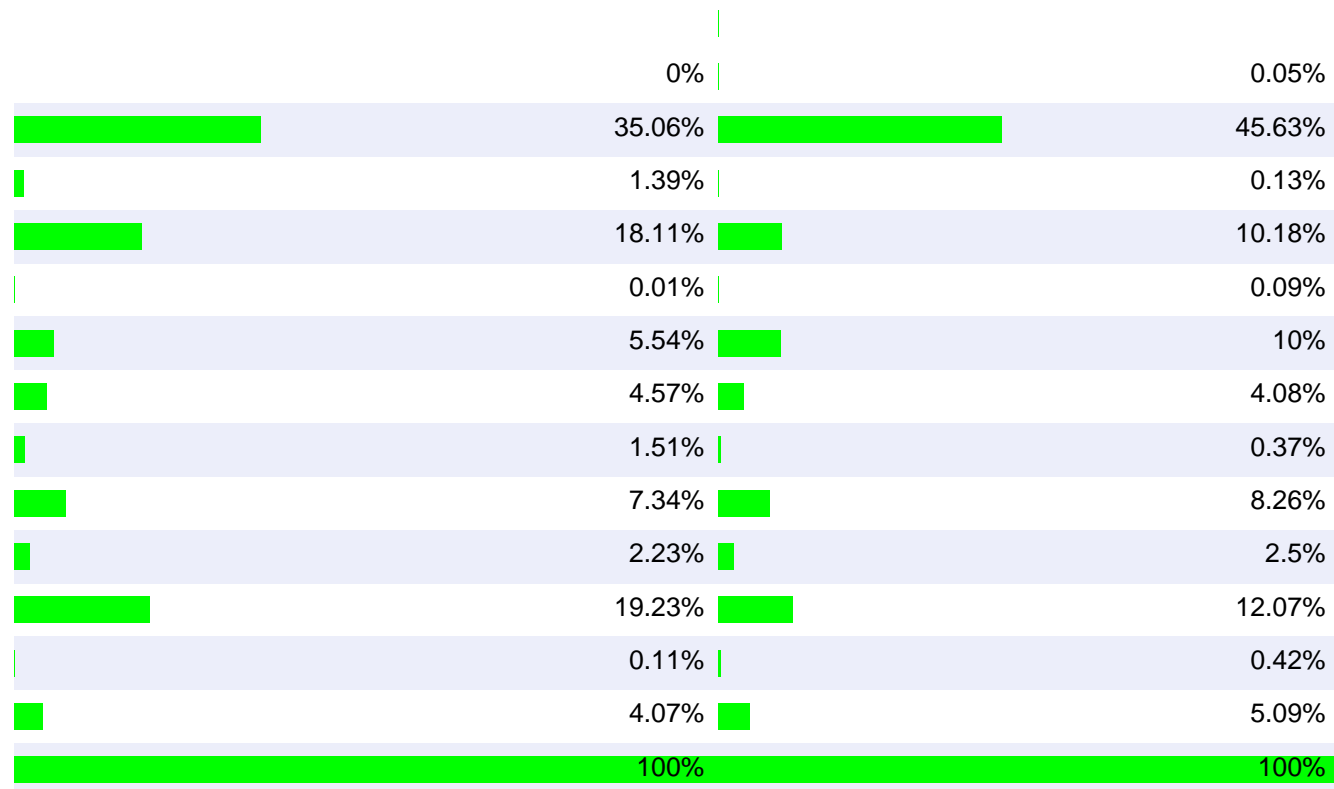
Masonicare

Based on Spending Breakdown by Claim

\$0.00	\$9.00	\$16.00
\$5687.00	\$8735.00	\$9399.00
\$225.00	\$24.00	\$46.00
\$2937.00	\$1949.00	\$1190.00
\$2.00	\$18.00	\$27.00
\$899.00	\$1915.00	\$1857.00
\$741.00	\$781.00	\$715.00
\$246.00	\$70.00	\$88.00
\$1190.00	\$1581.00	\$1645.00
\$361.00	\$479.00	\$558.00
\$3120.00	\$2310.00	\$1646.00
\$18.00	\$80.00	\$110.00
\$660.00	\$974.00	\$966.00
\$16222.00	\$19142.00	\$18506.00

Masonicare

Based on Spending Breakdown by Claim



Masonicare

Based on Spending Breakdown by Claim

